

LAW  
KF  
3643  
.99  
U63  
1986, v. 3













99th Congress }  
2d Session }

COMMITTEE PRINT

{ WMCP:  
{ 99-17

# **COMPILATION OF THE SOCIAL SECURITY LAWS**

---

**INCLUDING THE SOCIAL SECURITY ACT,  
AS AMENDED, AND RELATED ENACTMENTS  
THROUGH JANUARY 1, 1986**

---

**VOLUME III  
SUPERSEDED PROVISIONS**





KF  
3643.99  
.U63  
1986  
v.3  
c.3

# COMPILATION OF THE SOCIAL SECURITY LAWS

---

INCLUDING THE SOCIAL SECURITY ACT,  
AS AMENDED, AND RELATED ENACTMENTS  
THROUGH JANUARY 1, 1986

---

VOLUME III  
SUPERSEDED PROVISIONS

CMS Library  
6257 13  
7750 Security Blvd.  
Baltimore, MD 21244

U.S. GOVERNMENT PRINTING OFFICE  
WASHINGTON : 1986

59-328 O

## COMMITTEE ON WAYS AND MEANS

DAN ROSTENKOWSKI, Illinois, *Chairman*

SAM M. GIBBONS, Florida  
J.J. PICKLE, Texas  
CHARLES B. RANGEL, New York  
FORTNEY H. (PETE) STARK, California  
JAMES R. JONES, Oklahoma  
ANDY JACOBS, Jr., Indiana  
HAROLD FORD, Tennessee  
ED JENKINS, Georgia  
RICHARD A. GEPHARDT, Missouri  
THOMAS J. DOWNEY, New York  
CECIL (CEC) HEFTEL, Hawaii  
WYCHE FOWLER, Jr., Georgia  
FRANK J. GUARINI, New Jersey  
MARTY RUSSO, Illinois  
DON J. PEASE, Ohio  
ROBERT T. MATSUI, California  
BERYL ANTHONY, Jr., Arkansas  
RONNIE G. FLIPPO, Alabama  
BYRON L. DORGAN, North Dakota  
BARBARA B. KENNELLY, Connecticut  
BRIAN J. DONNELLY, Massachusetts  
WILLIAM J. COYNE, Pennsylvania

JOHN J. DUNCAN, Tennessee  
BILL ARCHER, Texas  
GUY VANDER JAGT, Michigan  
PHILIP M. CRANE, Illinois  
BILL FRENZEL, Minnesota  
RICHARD T. SCHULZE, Pennsylvania  
BILL GRADISON, Ohio  
W. HENSON MOORE, Louisiana  
CARROLL A. CAMPBELL, Jr.,  
    South Carolina  
WILLIAM M. THOMAS, California  
RAYMOND J. McGRATH, New York  
HAL DAUB, Nebraska  
JUDD GREGG, New Hampshire

JOSEPH K. DOWLEY, *Chief Counsel*  
M. KENNETH BOWLER, *Deputy Chief of Staff*  
ROBERT J. LEONARD, *Chief Tax Counsel*  
A.L. SINGLETON, *Minority Chief of Staff*



## PREFACE

### The Social Security Act

The original Social Security Act is P.L. 74-271 (49 Stat. 620), approved August 14, 1935. The Social Security Act has been amended, in part, a number of times.

### Administration of the Social Security Act

The Social Security Board was responsible for administration of the original Social Security Act except for parts 1, 2, 3, and 5 of Title V (which were administered by the Children's Bureau, then in the Department of Labor); part 4 of Title V which increased the appropriations authorized for carrying out the Act of June 2, 1920 (now see Rehabilitation Act of 1973); and Title VI which authorized grants to the States for public health work.

The Social Security Board was transferred to the Federal Security Agency by Reorganization Plan No. 1 of 1939 and the Board's functions were thenceforth to be carried on under the direction and supervision of the Federal Security Administrator. Reorganization Plan No. 2 of 1946 transferred the functions of the Social Security Board, as well as the functions of the Children's Bureau and the functions of the Secretary of Labor under Title V of the Social Security Act, to the Federal Security Administrator and the Board was abolished.

The Bureau of Employment Security, with its unemployment compensation and employment service functions, was transferred from the Federal Security Agency to the Department of Labor by Reorganization Plan No. 2 of 1949.

The Department of Health, Education, and Welfare was established by Reorganization Plan No. 1 of 1953 with a Secretary of Health, Education, and Welfare as the head of the Department. All functions of the Federal Security Agency, which was abolished, were transferred to the Department of Health, Education, and Welfare. The functions of the Federal Security Administrator were transferred to the Secretary of Health, Education, and Welfare.

The Department of Health, Education, and Welfare was redesignated the Department of Health and Human Services, and the Secretary of Health, Education, and Welfare was redesignated the Secretary of Health and Human Services by P.L. 96-88, §509, approved October 17, 1979. That public law did not amend references to the Secretary in the Social Security Act. The Department of Health and Human Services redesignation was effective May 4, 1980 (45 Federal Register 29642; May 5, 1980). The Department of Education which was established by P.L. 96-88 was activated May 4, 1980 (Executive Order 12212 of May 2, 1980; 45 Federal Register 29557; May 5, 1980).

### Compilation of the Social Security Laws

This compilation contains:

#### *Volume I*

- (a) Table of Contents;
- (b) The Social Security Act, as in effect;
- (c) Internal Revenue Code—Selected Provisions; and
- (d) Index to the Social Security Act.

#### *Volume II*

- (a) Table of Contents;
- (b) Social Security Act Appendixes;
- (c) Provisions of public laws and statutes which are cited in the Social Security Act, and other provisions of the Internal Revenue Code; and
- (d) Provisions of public laws which affect administration of the Social Security Act but do not amend it.

#### *Volume III*

- (a) The Social Security Act as originally enacted;
- (b) Table of Contents; and
- (c) Provisions of the Social Security Act which have been superseded from 1935 to the present.

### Effect of Compilation

This Compilation of the Social Security Laws is not prima facie evidence of the provisions of the Social Security Act or other laws or statutes which are included. This compilation has been prepared solely for convenient reference purposes.





---

---

**THE SOCIAL SECURITY ACT AS ORIGINALLY  
ENACTED AUGUST 14, 1935  
PUBLIC LAW 74-271; 49 Stat. 620**

---

---



## AN ACT

To provide for the general welfare by establishing a system of Federal old-age benefits, and by enabling the several States to make more adequate provision for aged persons, blind persons, dependent and crippled children, maternal and child welfare, public health, and the administration of their unemployment compensation laws; to establish a Social Security Board; to raise revenue; and for other purposes.

*Be it enacted by the Senate and House of Representatives of the United States of America in Congress assembled,*

### TITLE I—GRANTS TO STATES FOR OLD-AGE ASSISTANCE

#### APPROPRIATION

SECTION 1. For the purpose of enabling each State to furnish financial assistance, as far as practicable under the conditions in such State, to aged needy individuals, there is hereby authorized to be appropriated for the fiscal year ending June 30, 1936, the sum of \$49,750,000, and there is hereby authorized to be appropriated for each fiscal year thereafter a sum sufficient to carry out the purposes of this title. The sums made available under this section shall be used for making payments to States which have submitted, and had approved by the Social Security Board established by Title VII (hereinafter referred to as the "Board"), State plans for old-age assistance.

#### STATE OLD-AGE ASSISTANCE PLANS

SEC. 2. (a) A State plan for old-age assistance must (1) provide that it shall be in effect in all political subdivisions of the State, and, if administered by them, be mandatory upon them; (2) provide for financial participation by the State; (3) either provide for the establishment or designation of a single State agency to administer the plan, or provide for the establishment or designation of a single State agency to supervise the administration of the plan; (4) provide for granting to any individual, whose claim for old-age assistance is denied, an opportunity for a fair hearing before such State agency; (5) provide such methods of administration (other than those relating to selection, tenure of office, and compensation of personnel) as are found by the Board to be necessary for the efficient operation of the plan; (6) provide that the State agency will make such reports, in such form and containing such information, as the Board may from time to time require, and comply with such provisions as the Board may from time to time find necessary to assure the correctness and verification of such reports; and (7) provide that, if the State or any of its political subdivisions collects from the estate of any recipient of old-age assistance any amount with respect to old-age assistance furnished him under the plan, one-half of the net amount so collected shall be promptly paid to the United States. Any payment so made shall be deposited in the Treasury to the credit of the appropriation for the purposes of this title.

(b) The Board shall approve any plan which fulfills the conditions specified in subsection (a), except that it shall not approve any plan which imposes, as a condition of eligibility for old-age assistance under the plan—

(1) An age requirement of more than sixty-five years, except that the plan may impose, effective until January 1, 1940, an age requirement of as much as seventy years; or

(2) Any residence requirement which excludes any resident of the State who has resided therein five years during the nine years immediately preceding the application for old-age assistance and has resided therein continuously for one year immediately preceding the application; or

(3) Any citizenship requirement which excludes any citizen of the United States.

#### PAYMENT TO STATES

SEC. 3. (a) From the sums appropriated therefor, the Secretary of the Treasury shall pay to each State which has an approved plan for old-age assistance, for each quarter, beginning with the quarter commencing July 1, 1935, (1) an amount, which shall be used exclusively as old-age assistance, equal to one-half of the total of the sums expended during such quarter as old-age assistance under the State plan with respect to each individual who at the time of such expenditure is sixty-five years of age or

older and is not an inmate of a public institution, not counting so much of such expenditure with respect to any individual for any month as exceeds \$30, and (2) 5 per centum of such amount, which shall be used for paying the costs of administering the State plan or for old-age assistance, or both, and for no other purpose: *Provided*, That the State plan, in order to be approved by the Board, need not provide for financial participation before July 1, 1937 by the State, in the case of any State which the Board, upon application by the State and after reasonable notice and opportunity for hearing to the State, finds is prevented by its constitution from providing such financial participation.

(b) The method of computing and paying such amounts shall be as follows:

(1) The Board shall, prior to the beginning of each quarter, estimate the amount to be paid to the State for such quarter under the provisions of clause (1) of subsection (a), such estimate to be based on (A) a report filed by the State containing its estimate of the total sum to be expended in such quarter in accordance with the provisions of such clause, and stating the amount appropriated or made available by the State and its political subdivisions for such expenditures in such quarter, and if such amount is less than one-half of the total sum of such estimated expenditures, the source or sources from which the difference is expected to be derived, (B) records showing the number of aged individuals in the State, and (C) such other investigation as the Board may find necessary.

(2) The Board shall then certify to the Secretary of the Treasury the amount so estimated by the Board, reduced or increased, as the case may be, by any sum by which it finds that its estimate for any prior quarter was greater or less than the amount which should have been paid to the State under clause (1) of subsection (a) for such quarter, except to the extent that such sum has been applied to make the amount certified for any prior quarter greater or less than the amount estimated by the Board for such prior quarter.

(3) The Secretary of the Treasury shall thereupon, through the Division of Disbursement of the Treasury Department and prior to audit or settlement by the General Accounting Office, pay to the State, at the time or times fixed by the Board, the amount so certified, increased by 5 per centum.

#### OPERATION OF STATE PLANS

SEC. 4. In the case of any State plan for old-age assistance which has been approved by the Board, if the Board, after reasonable notice and opportunity for hearing to the State agency administering or supervising the administration of such plan, finds—

(1) that the plan has been so changed as to impose any age, residence, or citizenship requirement prohibited by section 2 (b), or that in the administration of the plan any such prohibited requirement is imposed, with the knowledge of such State agency, in a substantial number of cases; or

(2) that in the administration of the plan there is a failure to comply substantially with any provision required by section 2 (a) to be included in the plan;

the Board shall notify such State agency that further payments will not be made to the State until the Board is satisfied that such prohibited requirement is no longer so imposed, and that there is no longer any such failure to comply. Until it is so satisfied it shall make no further certification to the Secretary of the Treasury with respect to such State.

#### ADMINISTRATION

SEC. 5. There is hereby authorized to be appropriated for the fiscal year ending June 30, 1936, the sum of \$250,000, for all necessary expenses of the Board in administering the provisions of this title.

#### DEFINITION

SEC. 6. When used in this title the term "old-age assistance" means money payments to aged individuals.

## TITLE II—FEDERAL OLD-AGE BENEFITS

#### OLD-AGE RESERVE ACCOUNT

SECTION 201. (a) There is hereby created an account in the Treasury of the United States to be known as the "Old-Age Reserve Account" hereinafter in this title called



the "Account". There is hereby authorized to be appropriated to the Account for each fiscal year, beginning with the fiscal year ending June 30, 1937, an amount sufficient as an annual premium to provide for the payments required under this title, such amount to be determined on a reserve basis in accordance with accepted actuarial principles, and based upon such tables of mortality as the Secretary of the Treasury shall from time to time adopt, and upon an interest rate of 3 per centum per annum compounded annually. The Secretary of the Treasury shall submit annually to the Bureau of the Budget an estimate of the appropriations to be made to the Account.

(b) It shall be the duty of the Secretary of the Treasury to invest such portion of the amounts credited to the Account as is not, in his judgment, required to meet current withdrawals. Such investment may be made only in interest-bearing obligations of the United States or in obligations guaranteed as to both principal and interest by the United States. For such purpose such obligations may be acquired (1) on original issue at par, or (2) by purchase of outstanding obligations at the market price. The purposes for which obligations of the United States may be issued under the Second Liberty Bond Act, as amended, are hereby extended to authorize the issuance at par of special obligations exclusively to the Account. Such special obligations shall bear interest at the rate of 3 per centum per annum. Obligations other than such special obligations may be acquired for the Account only on such terms as to provide an investment yield of not less than 3 per centum per annum.

(c) Any obligations acquired by the Account (except special obligations issued exclusively to the Account) may be sold at the market price, and such special obligations may be redeemed at par plus accrued interest.

(d) The interest on, and the proceeds from the sale or redemption of, any obligations held in the Account shall be credited to and form a part of the Account.

(e) All amounts credited to the Account shall be available for making payments required under this title.

(f) The Secretary of the Treasury shall include in his annual report the actuarial status of the Account.

#### OLD-AGE BENEFIT PAYMENTS

SEC. 202. (a) Every qualified individual (as defined in section 210) shall be entitled to receive, with respect to the period beginning on the date he attains the age of sixty-five, or on January 1, 1942, whichever is the later, and ending on the date of his death, an old-age benefit (payable as nearly as practicable in equal monthly installments) as follows:

(1) If the total wages (as defined in section 210) determined by the Board to have been paid to him, with respect to employment (as defined in section 210) after December 31, 1936, and before he attained the age of sixty-five, were not more than \$3,000, the old-age benefit shall be at a monthly rate of one-half of 1 per centum of such total wages;

(2) If such total wages were more than \$3,000, the old-age benefit shall be at a monthly rate equal to the sum of the following:

(A) One-half of 1 per centum of \$3,000; plus

(B) One-twelfth of 1 per centum of the amount by which such total wages exceeded \$3,000 and did not exceed \$45,000; plus

(C) One-twenty-fourth of 1 per centum of the amount by which such total wages exceeded \$45,000.

(b) In no case shall the monthly rate computed under subsection (a) exceed \$85.

(c) If the Board finds at any time that more or less than the correct amount has theretofore been paid to any individual under this section, then, under regulations made by the Board, proper adjustments shall be made in connection with subsequent payments under this section to the same individual.

(d) Whenever the Board finds that any qualified individual has received wages with respect to regular employment after he attained the age of sixty-five, the old-age benefit payable to such individual shall be reduced, for each calendar month in any part of which such regular employment occurred, by an amount equal to one month's benefit. Such reduction shall be made, under regulations prescribed by the Board, by deductions from one or more payments of old-age benefit to such individual.

#### PAYMENTS UPON DEATH

SEC. 203. (a) If any individual dies before attaining the age of sixty-five, there shall be paid to his estate an amount equal to  $3\frac{1}{2}$  per centum of the total wages determined by the Board to have been paid to him, with respect to employment after December 31, 1936.



(b) If the Board finds that the correct amount of the old-age benefit payable to a qualified individual during his life under section 202 was less than  $3\frac{1}{2}$  per centum of the total wages by which such old-age benefit was measurable, then there shall be paid to his estate a sum equal to the amount, if any, by which such  $3\frac{1}{2}$  per centum exceeds the amount (whether more or less than the correct amount) paid to him during his life as old-age benefit.

(c) If the Board finds that the total amount paid to a qualified individual under an old-age benefit during his life was less than the correct amount to which he was entitled under section 202, and that the correct amount of such old-age benefit was  $3\frac{1}{2}$  per centum or more of the total wages by which such old-age benefit was measurable, then there shall be paid to his estate a sum equal to the amount, if any, by which the correct amount of the old-age benefit exceeds the amount which was so paid to him during his life.

#### PAYMENTS TO AGED INDIVIDUALS NOT QUALIFIED FOR BENEFITS

SEC. 204. (a) There shall be paid in a lump sum to any individual who, upon attaining the age of sixty-five, is not a qualified individual, an amount equal to  $3\frac{1}{2}$  per centum of the total wages determined by the Board to have been paid to him, with respect to employment after December 31, 1936, and before he attained the age of sixty-five.

(b) After any individual becomes entitled to any payment under subsection (a), no other payment shall be made under this title in any manner measured by wages paid to him, except that any part of any payment under subsection (a) which is not paid to him before his death shall be paid to his estate.

#### AMOUNTS OF \$500 OR LESS PAYABLE TO ESTATES

SEC. 205. If any amount payable to an estate under section 203 or 204 is \$500 or less, such amount may, under regulations prescribed by the Board, be paid to the persons found by the Board to be entitled thereto under the law of the State in which the deceased was domiciled, without the necessity of compliance with the requirements of law with respect to the administration of such estate.

#### OVERPAYMENTS DURING LIFE

SEC. 206. If the Board finds that the total amount paid to a qualified individual under an old-age benefit during his life was more than the correct amount to which he was entitled under section 202, and was  $3\frac{1}{2}$  per centum or more of the total wages by which such old-age benefit was measurable, then upon his death there shall be repaid to the United States by his estate the amount, if any, by which such total amount paid to him during his life exceeds whichever of the following is the greater: (1) Such  $3\frac{1}{2}$  per centum, or (2) the correct amount to which he was entitled under section 202.

#### METHOD OF MAKING PAYMENTS

SEC. 207. The Board shall from time to time certify to the Secretary of the Treasury the name and address of each person entitled to receive a payment under this title, the amount of such payment, and the time at which it should be made, and the Secretary of the Treasury through the Division of Disbursement of the Treasury Department, and prior to audit or settlement by the General Accounting Office, shall make payment in accordance with the certification by the Board.

#### ASSIGNMENT

SEC. 208. The right of any person to any future payment under this title shall not be transferable or assignable, at law or in equity, and none of the moneys paid or payable or rights existing under this title shall be subject to execution, levy, attachment, garnishment, or other legal process, or to the operation of any bankruptcy or insolvency law.

#### PENALTIES

SEC. 209. Whoever in any application for any payment under this title makes any false statement as to any material fact, knowing such statement to be false, shall be fined not more than \$1,000 or imprisoned for not more than one year, or both.

#### DEFINITIONS

SEC. 210. When used in this title—

(a) The term "wages" means all remuneration for employment, including the cash value of all remuneration paid in any medium other than cash; except that such term shall not include that part of the remuneration which, after remuneration equal to \$3,000 has been paid to an individual by an employer with respect to employment during any calendar year, is paid to such individual by such employer with respect to employment during such calendar year.

(b) The term "employment" means any service, of whatever nature, performed within the United States by an employee for his employer, except—

- (1) Agricultural labor;
- (2) Domestic service in a private home;
- (3) Casual labor not in the course of the employer's trade or business;
- (4) Service performed as an officer or member of the crew of a vessel documented under the laws of the United States or of any foreign country;
- (5) Service performed in the employ of the United States Government or of an instrumentality of the United States;
- (6) Service performed in the employ of a State, a political subdivision thereof, or an instrumentality of one or more States or political subdivisions;
- (7) Service performed in the employ of a corporation, community chest, fund, or foundation, organized and operated exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals, no part of the net earnings of which inures to the benefit of any private shareholder or individual.

(c) The term "qualified individual" means any individual with respect to whom it appears to the satisfaction of the Board that—

- (1) He is at least sixty-five years of age; and
- (2) The total amount of wages paid to him, with respect to employment after December 31, 1936, and before he attained the age of sixty-five, was not less than \$2,000; and
- (3) Wages were paid to him, with respect to employment on some five days after December 31, 1936, and before he attained the age of sixty-five, each day being in a different calendar year.

### TITLE III—GRANTS TO STATES FOR UNEMPLOYMENT COMPENSATION ADMINISTRATION

#### APPROPRIATION

SECTION 301. For the purpose of assisting the States in the administration of their unemployment compensation laws, there is hereby authorized to be appropriated, for the fiscal year ending June 30, 1936, the sum of \$4,000,000, and for each fiscal year thereafter the sum of \$49,000,000, to be used as hereinafter provided.

#### PAYMENTS TO STATES

SEC. 302. (a) The Board shall from time to time certify to the Secretary of the Treasury for payment to each State which has an unemployment compensation law approved by the Board under Title IX, such amounts as the Board determines to be necessary for the proper administration of such law during the fiscal year in which such payment is to be made. The Board's determination shall be based on (1) the population of the State; (2) an estimate of the number of persons covered by the State law and of the cost of proper administration of such law; and (3) such other factors as the Board finds relevant. The Board shall not certify for payment under this section in any fiscal year a total amount in excess of the amount appropriated therefor for such fiscal year.

(b) Out of the sums appropriated therefor, the Secretary of the Treasury shall, upon receiving a certification under subsection (a), pay, through the Division of Disbursement of the Treasury Department and prior to audit or settlement by the General Accounting Office, to the State agency charged with the administration of such law the amount so certified.

#### PROVISIONS OF STATE LAWS

SEC. 303. (a) The Board shall make no certification for payment to any State unless it finds that the law of such State, approved by the Board under Title IX, includes provisions for—

- (1) Such methods of administration (other than those relating to selection, tenure of office, and compensation of personnel) as are found by the Board to be



reasonably calculated to insure full payment of unemployment compensation when due; and

(2) Payment of unemployment compensation solely through public employment offices in the State or such other agencies as the Board may approve; and

(3) Opportunity for a fair hearing, before an impartial tribunal, for all individuals whose claims for unemployment compensation are denied; and

(4) The payment of all money received in the unemployment fund of such State, immediately upon such receipt, to the Secretary of the Treasury to the credit of the Unemployment Trust Fund established by section 904; and

(5) Expenditure of all money requisitioned by the State agency from the Unemployment Trust Fund, in the payment of unemployment compensation, exclusive of expenses of administration; and

(6) The making of such reports, in such form and containing such information, as the Board may from time to time require, and compliance with such provisions as the Board may from time to time find necessary to assure the correctness and verification of such reports; and

(7) Making available upon request to any agency of the United States charged with the administration of public works or assistance through public employment, the name, address, ordinary occupation and employment status of each recipient of unemployment compensation, and a statement of such recipient's rights to further compensation under such law.

(b) Whenever the Board, after reasonable notice and opportunity for hearing to the State agency charged with the administration of the State law, finds that in the administration of the law there is—

(1) a denial, in a substantial number of cases, of unemployment compensation to individuals entitled thereto under such law; or

(2) a failure to comply substantially with any provision specified in subsection (a);

the Board shall notify such State agency that further payments will not be made to the State until the Board is satisfied that there is no longer any such denial or failure to comply. Until it is so satisfied it shall make no further certification to the Secretary of the Treasury with respect to such State.

## TITLE IV—GRANTS TO STATES FOR AID TO DEPENDENT CHILDREN

### APPROPRIATION

SECTION 401. For the purpose of enabling each State to furnish financial assistance, as far as practicable under the conditions in such State, to needy dependent children, there is hereby authorized to be appropriated for the fiscal year ending June 30, 1936, the sum of \$24,750,000, and there is hereby authorized to be appropriated for each fiscal year thereafter a sum sufficient to carry out the purposes of this title. The sums made available under this section shall be used for making payments to States which have submitted, and had approved by the Board, State plans for aid to dependent children.

### STATE PLANS FOR AID TO DEPENDENT CHILDREN

SEC. 402 (a) A State plan for aid to dependent children must (1) provide that it shall be in effect in all political subdivisions of the State, and, if administered by them, be mandatory upon them; (2) provide for financial participation by the State; (3) either provide for the establishment or designation of a single State agency to administer the plan, or provide for the establishment or designation of a single State agency to supervise the administration of the plan; (4) provide for granting to any individual, whose claim with respect to aid to a dependent child is denied, an opportunity for a fair hearing before such State agency; (5) provide such methods of administration (other than those relating to selection, tenure of office, and compensation of personnel) as are found by the Board to be necessary for the efficient operation of the plan; and (6) provide that the State agency will make such reports, in such form and containing such information, as the Board may from time to time require, and comply with such provisions as the Board may from time to time find necessary to assure the correctness and verification of such reports.

(b) The Board shall approve any plan which fulfills the conditions specified in subsection (a), except that it shall not approve any plan which imposes as a condition of eligibility for aid to dependent children, a residence requirement which denies aid with respect to any child residing in the State (1) who has resided in the State for one

year immediately preceding the application for such aid, or (2) who was born within the State within one year immediately preceding the application, if its mother has resided in the State for one year immediately preceding the birth.

#### PAYMENT TO STATES

SEC. 403. (a) From the sums appropriated therefor, the Secretary of the Treasury shall pay to each State which has an approved plan for aid to dependent children, for each quarter, beginning with the quarter commencing July 1, 1935, an amount, which shall be used exclusively for carrying out the State plan, equal to one-third of the total of the sums expended during such quarter under such plan, not counting so much of such expenditure with respect to any dependent child for any month as exceeds \$18, or if there is more than one dependent child in the same home, as exceeds \$18 for any month with respect to one such dependent child and \$12 for such month with respect to each of the other dependent children.

(b) The method of computing and paying such amounts shall be as follows:

(1) The Board shall, prior to the beginning of each quarter, estimate the amount to be paid to the State for such quarter under the provisions of subsection (a), such estimate to be based on (A) a report filed by the State containing its estimate of the total sum to be expended in such quarter in accordance with the provisions of such subsection and stating the amount appropriated or made available by the State and its political subdivisions for such expenditures in such quarter, and if such amount is less than two-thirds of the total sum of such estimated expenditures, the source or sources from which the difference is expected to be derived, (B) records showing the number of dependent children in the State, and (C) such other investigation as the Board may find necessary.

(2) The Board shall then certify to the Secretary of the Treasury the amount so estimated by the Board, reduced or increased, as the case may be, by any sum by which it finds that its estimate for any prior quarter was greater or less than the amount which should have been paid to the State for such quarter, except to the extent that such sum has been applied to make the amount certified for any prior quarter greater or less than the amount estimated by the Board for such prior quarter.

(3) The Secretary of the Treasury shall thereupon, through the Division of Disbursement of the Treasury Department and prior to audit or settlement by the General Accounting Office, pay to the State, at the time or times fixed by the Board, the amount so certified.

#### OPERATION OF STATE PLANS

SEC. 404. In the case of any State plan for aid to dependent children which has been approved by the Board, if the Board, after reasonable notice and opportunity for hearing to the State agency administering or supervising the administration of such plan, finds—

(1) that the plan has been so changed as to impose any residence requirement prohibited by section 402 (b), or that in the administration of the plan any such prohibited requirement is imposed, with the knowledge of such State agency, in a substantial number of cases; or

(2) that in the administration of the plan there is a failure to comply substantially with any provision required by section 402 (a) to be included in the plan;

the Board shall notify such State agency that further payments will not be made to the State until the Board is satisfied that such prohibited requirement is no longer so imposed, and that there is no longer any such failure to comply. Until it is so satisfied it shall make no further certification to the Secretary of the Treasury with respect to such State.

#### ADMINISTRATION

SEC. 405. There is hereby authorized to be appropriated for the fiscal year ending June 30, 1936, the sum of \$250,000 for all necessary expenses of the Board in administering the provisions of this title.

#### DEFINITIONS

SEC. 406. When used in this title—

(a) The term "dependent child" means a child under the age of sixteen who has been deprived of parental support or care by reason of the death, continued absence from the home, or physical or mental incapacity of a parent, and who is living with his



father, mother, grandfather, grandmother, brother, sister, stepfather, stepmother, stepbrother, stepsister, uncle, or aunt, in a place of residence maintained by one or more of such relatives as his or their own home;

(b) The term "aid to dependent children" means money payments with respect to a dependent child or dependent children.

## TITLE V—GRANTS TO STATES FOR MATERNAL AND CHILD WELFARE

### PART 1—MATERNAL AND CHILD HEALTH SERVICES

#### APPROPRIATION

SECTION 501. For the purpose of enabling each State to extend and improve, as far as practicable under the conditions in such State, services for promoting the health of mothers and children, especially in rural areas and in areas suffering from severe economic distress, there is hereby authorized to be appropriated for each fiscal year, beginning with the fiscal year ending June 30, 1936, the sum of \$3,800,000. The sums made available under this section shall be used for making payments to States which have submitted, and had approved by the Chief of the Children's Bureau, State plans for such services.

#### ALLOTMENTS TO STATES

SEC. 502. (a) Out of the sums appropriated pursuant to section 501 for each fiscal year the Secretary of Labor shall allot to each State \$20,000, and such part of \$1,800,000 as he finds that the number of live births in such State bore to the total number of live births in the United States, in the latest calendar year for which the Bureau of the Census has available statistics.

(b) Out of the sums appropriated pursuant to section 501 for each fiscal year the Secretary of Labor shall allot to the States \$980,000 (in addition to the allotments made under subsection (a)), according to the financial need of each State for assistance in carrying out its State plan, as determined by him after taking into consideration the number of live births in such State.

(c) The amount of any allotment to a State under subsection (a) for any fiscal year remaining unpaid to such State at the end of such fiscal year shall be available for payment to such State under section 504 until the end of the second succeeding fiscal year. No payment to a State under section 504 shall be made out of its allotment for any fiscal year until its allotment for the preceding fiscal year has been exhausted or has ceased to be available.

#### APPROVAL OF STATE PLANS

SEC. 503. (a) A State plan for maternal and child-health services must (1) provide for financial participation by the State; (2) provide for the administration of the plan by the State health agency or the supervision of the administration of the plan by the State health agency; (3) provide such methods of administration (other than those relating to selection, tenure of office, and compensation of personnel) as are necessary for the efficient operation of the plan; (4) provide that the State health agency will make such reports, in such form and containing such information, as the Secretary of Labor may from time to time require, and comply with such provisions as he may from time to time find necessary to assure the correctness and verification of such reports; (5) provide for the extension and improvement of local maternal and child-health services administered by local child-health units; (6) provide for cooperation with medical, nursing, and welfare groups and organizations; and (7) provide for the development of demonstration services in needy areas and among groups in special need.

(b) The Chief of the Children's Bureau shall approve any plan which fulfills the conditions specified in subsection (a) and shall thereupon notify the Secretary of Labor and the State health agency of his approval.

#### PAYMENT TO STATES

SEC. 504. (a) From the sums appropriated therefor and the allotments available under section 502 (a), the Secretary of the Treasury shall pay to each State which has an approved plan for maternal and child-health services, for each quarter, beginning with the quarter commencing July 1, 1935, an amount, which shall be used exclusively

for carrying out the State plan, equal to one-half of the total sum expended during such quarter for carrying out such plan.

(b) The method of computing and paying such amounts shall be as follows:

(1) The Secretary of Labor shall, prior to the beginning of each quarter, estimate the amount to be paid to the State for such quarter under the provisions of subsection (a), such estimate to be based on (A) a report filed by the State containing its estimate of the total sum to be expended in such quarter in accordance with the provisions of such subsection and stating the amount appropriated or made available by the State and its political subdivisions for such expenditures in such quarter, and if such amount is less than one-half of the total sum of such estimated expenditures, the source or sources from which the difference is expected to be derived, and (B) such investigation as he may find necessary.

(2) The Secretary of Labor shall then certify the amount so estimated by him to the Secretary of the Treasury, reduced or increased, as the case may be, by any sum by which the Secretary of Labor finds that his estimate for any prior quarter was greater or less than the amount which should have been paid to the State for such quarter, except to the extent that such sum has been applied to make the amount certified for any prior quarter greater or less than the amount estimated by the Secretary of Labor for such prior quarter.

(3) The Secretary of the Treasury shall thereupon, through the Division of Disbursement of the Treasury Department and prior to audit or settlement by the General Accounting Office, pay to the State, at the time or times fixed by the Secretary of Labor, the amount so certified.

(c) The Secretary of Labor shall from time to time certify to the Secretary of the Treasury the amounts to be paid to the States from the allotments available under section 502 (b), and the Secretary of the Treasury shall, through the Division of Disbursement of the Treasury Department and prior to audit or settlement by the General Accounting Office, make payments of such amounts from such allotments at the time or times specified by the Secretary of Labor.

#### OPERATION OF STATE PLANS

SEC. 505. In the case of any State plan for maternal and child-health services which has been approved by the Chief of the Children's Bureau, if the Secretary of Labor, after reasonable notice and opportunity for hearing to the State agency administering or supervising the administration of such plan, finds that in the administration of the plan there is a failure to comply substantially with any provision required by section 503 to be included in the plan, he shall notify such State agency that further payments will not be made to the State until he is satisfied that there is no longer any such failure to comply. Until he is so satisfied he shall make no further certification to the Secretary of the Treasury with respect to such State.

### PART 2—SERVICES FOR CRIPPLED CHILDREN

#### APPROPRIATION

SEC. 511. For the purpose of enabling each State to extend and improve (especially in rural areas and in areas suffering from severe economic distress), as far as practicable under the conditions in such State, services for locating crippled children, and for providing medical, surgical, corrective, and other services and care, and facilities for diagnosis, hospitalization, and aftercare, for children who are crippled or who are suffering from conditions which lead to crippling, there is hereby authorized to be appropriated for each fiscal year, beginning with the fiscal year ending June 30, 1936, the sum of \$2,850,000. The sums made available under this section shall be used for making payments to States which have submitted, and had approved by the Chief of the Children's Bureau, State plans for such services.

#### ALLOTMENTS TO STATES

SEC. 512. (a) Out of the sums appropriated pursuant to section 511 for each fiscal year the Secretary of Labor shall allot to each State \$20,000, and the remainder to the States according to the need of each State as determined by him after taking into consideration the number of crippled children in such State in need of the services referred to in section 511 and the cost of furnishing such services to them.

(b) The amount of any allotment to a State under subsection (a) for any fiscal year remaining unpaid to such State at the end of such fiscal year shall be available for payment to such State under section 514 until the end of the second succeeding fiscal



year. No payment to a State under section 514 shall be made out of its allotment for any fiscal year until its allotment for the preceding fiscal year has been exhausted or has ceased to be available.

#### APPROVAL OF STATE PLANS

SEC. 513. (a) A State plan for services for crippled children must (1) provide for financial participation by the State; (2) provide for the administration of the plan by a State agency or the supervision of the administration of the plan by a State agency; (3) provide such methods of administration (other than those relating to selection, tenure of office, and compensation of personnel) as are necessary for the efficient operation of the plan; (4) provide that the State agency will make such reports, in such form and containing such information, as the Secretary of Labor may from time to time require, and comply with such provisions as he may from time to time find necessary to assure the correctness and verification of such reports; (5) provide for carrying out the purposes specified in section 511; and (6) provide for cooperation with medical, health, nursing, and welfare groups and organizations and with any agency in such State charged with administering State laws providing for vocational rehabilitation of physically handicapped children.

(b) The Chief of the Children's Bureau shall approve any plan which fulfills the conditions specified in subsection (a) and shall thereupon notify the Secretary of Labor and the State agency of his approval.

#### PAYMENT TO STATES

SEC. 514. (a) From the sums appropriated therefor and the allotments available under section 512, the Secretary of the Treasury shall pay to each State which has an approved plan for services for crippled children, for each quarter, beginning with the quarter commencing July 1, 1935, an amount, which shall be used exclusively for carrying out the State plan, equal to one-half of the total sum expended during such quarter for carrying out such plan.

(b) The method of computing and paying such amounts shall be as follows:

(1) The Secretary of Labor shall, prior to the beginning of each quarter, estimate the amount to be paid to the State for such quarter under the provisions of subsection (a), such estimate to be based on (A) a report filed by the State containing its estimate of the total sum to be expended in such quarter in accordance with the provisions of such subsection and stating the amount appropriated or made available by the State and its political subdivisions for such expenditures in such quarter, and if such amount is less than one-half of the total sum of such estimated expenditures, the source or sources from which the difference is expected to be derived, and (B) such investigation as he may find necessary.

(2) The Secretary of Labor shall then certify the amount so estimated by him to the Secretary of the Treasury, reduced or increased, as the case may be, by any sum by which the Secretary of Labor finds that his estimate for any prior quarter was greater or less than the amount which should have been paid to the State for such quarter, except to the extent that such sum has been applied to make the amount certified for any prior quarter greater or less than the amount estimated by the Secretary of Labor for such prior quarter.

(3) The Secretary of the Treasury shall thereupon, through the Division of Disbursement of the Treasury Department and prior to audit or settlement by the General Accounting Office, pay to the State, at the time or times fixed by the Secretary of Labor, the amount so certified.

#### OPERATION OF STATE PLANS

SEC. 515. In the case of any State plan for services for crippled children which has been approved by the Chief of the Children's Bureau, if the Secretary of Labor, after reasonable notice and opportunity for hearing to the State agency administering or supervising the administration of such plan, finds that in the administration of the plan there is a failure to comply substantially with any provision required by section 513 to be included in the plan, he shall notify such State agency that further payments will not be made to the State until he is satisfied that there is no longer any such failure to comply. Until he is so satisfied he shall make no further certification to the Secretary of the Treasury with respect to such State.

## PART 3—CHILD-WELFARE SERVICES

SEC. 521. (a) For the purpose of enabling the United States, through the Children's Bureau, to cooperate with State public-welfare agencies in establishing, extending, and strengthening, especially in predominantly rural areas, public-welfare services (hereinafter in this section referred to as "child-welfare services") for the protection and care of homeless, dependent, and neglected children, and children in danger of becoming delinquent, there is hereby authorized to be appropriated for each fiscal year, beginning with the fiscal year ending June 30, 1936, the sum of \$1,500,000. Such amount shall be allotted by the Secretary of Labor for use by cooperating State public-welfare agencies on the basis of plans developed jointly by the State agency and the Children's Bureau, to each State, \$10,000, and the remainder to each State on the basis of such plans, not to exceed such part of the remainder as the rural population of such State bears to the total rural population of the United States. The amount so allotted shall be expended for payment of part of the cost of district, county or other local child-welfare services in areas predominantly rural, and for developing State services for the encouragement and assistance of adequate methods of community child-welfare organization in areas predominantly rural and other areas of special need. The amount of any allotment to a State under this section for any fiscal year remaining unpaid to such State at the end of such fiscal year shall be available for payment to such State under this section until the end of the second succeeding fiscal year. No payment to a State under this section shall be made out of its allotment for any fiscal year until its allotment for the preceding fiscal year has been exhausted or has ceased to be available.

(b) From the sums appropriated therefor and the allotments available under subsection (a) the Secretary of Labor shall from time to time certify to the Secretary of the Treasury the amounts to be paid to the States, and the Secretary of the Treasury shall, through the Division of Disbursement of the Treasury Department and prior to audit or settlement by the General Accounting Office, make payments of such amounts from such allotments at the time or times specified by the Secretary of Labor.

## PART 4—VOCATIONAL REHABILITATION

SEC. 531. (a) In order to enable the United States to cooperate with the States and Hawaii in extending and strengthening their programs of vocational rehabilitation of the physically disabled, and to continue to carry out the provisions and purposes of the Act entitled "An Act to provide for the promotion of vocational rehabilitation of persons disabled in industry or otherwise and their return to civil employment", approved June 2, 1920, as amended (U.S.C., title 29, ch. 4; U.S.C., Supp. VII, title 29, secs. 31, 32, 34, 35, 37, 39, and 40), there is hereby authorized to be appropriated for the fiscal years ending June 30, 1936, and June 30, 1937, the sum of \$841,000 for each such fiscal year in addition to the amount of the existing authorization, and for each fiscal year thereafter the sum of \$1,938,000. Of the sums appropriated pursuant to such authorization for each fiscal year, \$5,000 shall be apportioned to the Territory of Hawaii and the remainder shall be apportioned among the several States in the manner provided in such Act of June 2, 1920, as amended.

(b) For the administration of such Act of June 2, 1920, as amended, by the Federal agency authorized to administer it, there is hereby authorized to be appropriated for the fiscal years ending June 30, 1936, and June 30, 1937, the sum of \$22,000 for each such fiscal year in addition to the amount of the existing authorization, and for each fiscal year thereafter the sum of \$102,000.

## PART 5—ADMINISTRATION

SEC. 541. (a) There is hereby authorized to be appropriated for the fiscal year ending June 30, 1936, the sum of \$425,000, for all necessary expenses of the Children's Bureau in administering the provisions of this title, except section 531.

(b) The Children's Bureau shall make such studies and investigations as will promote the efficient administration of this title, except section 531.

(c) The Secretary of Labor shall include in his annual report to Congress a full account of the administration of this title, except section 531.

## TITLE VI—PUBLIC HEALTH WORK

## APPROPRIATION

SEC. 601. For the purpose of assisting States, counties, health districts, and other political subdivisions of the States in establishing and maintaining adequate public-



health services, including the training of personnel for State and local health work, there is hereby authorized to be appropriated for each fiscal year, beginning with the fiscal year ending June 30, 1936, the sum of \$8,000,000 to be used as hereinafter provided.

#### STATE AND LOCAL PUBLIC HEALTH SERVICES

SEC. 602. (a) The Surgeon General of the Public Health Service, with the approval of the Secretary of the Treasury, shall, at the beginning of each fiscal year, allot to the States the total of (1) the amount appropriated for such year pursuant to section 601; and (2) the amounts of the allotments under this section for the preceding fiscal year remaining unpaid to the States at the end of such fiscal year. The amounts of such allotments shall be determined on the basis of (1) the population; (2) the special health problems; and (3) the financial needs; of the respective States. Upon making such allotments the Surgeon General of the Public Health Service shall certify the amounts thereof to the Secretary of the Treasury.

(b) The amount of an allotment to any State under subsection (a) for any fiscal year, remaining unpaid at the end of such fiscal year, shall be available for allotment to States under subsection (a) for the succeeding fiscal year, in addition to the amount appropriated for such year.

(c) Prior to the beginning of each quarter of the fiscal year, the Surgeon General of the Public Health Service shall, with the approval of the Secretary of the Treasury, determine in accordance with rules and regulations previously prescribed by such Surgeon General after consultation with a conference of the State and Territorial health authorities, the amount to be paid to each State for such quarter from the allotment to such State, and shall certify the amount so determined to the Secretary of the Treasury. Upon receipt of such certification, the Secretary of the Treasury shall, through the Division of Disbursement of the Treasury Department and prior to audit or settlement by the General Accounting Office, pay in accordance with such certification.

(d) The moneys so paid to any State shall be expended solely in carrying out the purposes specified in section 601, and in accordance with plans presented by the health authority of such State and approved by the Surgeon General of the Public Health Service.

#### INVESTIGATIONS

SEC. 603. (a) There is hereby authorized to be appropriated for each fiscal year, beginning with the fiscal year ending June 30, 1936, the sum of \$2,000,000 for expenditure by the Public Health Service for investigation of disease and problems of sanitation (including the printing and binding of the findings of such investigations), and for the pay and allowances and traveling expenses of personnel of the Public Health Service, including commissioned officers, engaged in such investigations or detailed to cooperate with the health authorities of any State in carrying out the purposes specified in section 601: *Provided*, That no personnel of the Public Health Service shall be detailed to cooperate with the health authorities of any State except at the request of the proper authorities of such State.

(b) The personnel of the Public Health Service paid from any appropriation not made pursuant to subsection (a) may be detailed to assist in carrying out the purposes of this title. The appropriation from which they are paid shall be reimbursed from the appropriation made pursuant to subsection (a) to the extent of their salaries and allowances for services performed while so detailed.

(c) The Secretary of the Treasury shall include in his annual report to Congress a full account of the administration of this title.

### TITLE VII—SOCIAL SECURITY BOARD

#### ESTABLISHMENT

SECTION 701. There is hereby established a Social Security Board (in this Act referred to as the "Board") to be composed of three members to be appointed by the President, by and with the advice and consent of the Senate. During his term of membership on the Board, no member shall engage in any other business, vocation, or employment. Not more than two of the members of the Board shall be members of the same political party. Each member shall receive a salary at the rate of \$10,000 a year and shall hold office for a term of six years, except that (1) any member appointed to fill a vacancy occurring prior to the expiration of the term for which his predecessor was appointed, shall be appointed for the remainder of such term; and (2) the terms of

office of the members first taking office after the date of the enactment of this Act shall expire, as designated by the President at the time of appointment, one at the end of two years, one at the end of four years, and one at the end of six years, after the date of the enactment of this Act. The President shall designate one of the members as the chairman of the Board.

#### DUTIES OF SOCIAL SECURITY BOARD

SEC. 702. The Board shall perform the duties imposed upon it by this Act and shall also have the duty of studying and making recommendations as to the most effective methods of providing economic security through social insurance, and as to legislation and matters of administrative policy concerning old-age pensions, unemployment compensation, accident compensation, and related subjects.

#### EXPENSES OF THE BOARD

SEC. 703. The Board is authorized to appoint and fix the compensation of such officers and employees, and to make such expenditures, as may be necessary for carrying out its functions under this Act. Appointments of attorneys and experts may be made without regard to the civil-service laws.

#### REPORTS

SEC. 704. The Board shall make a full report to Congress, at the beginning of each regular session, of the administration of the functions with which it is charged.

### TITLE VIII—TAXES WITH RESPECT TO EMPLOYMENT

#### INCOME TAX ON EMPLOYEES

SECTION 801. In addition to other taxes, there shall be levied, collected, and paid upon the income of every individual a tax equal to the following percentages of the wages (as defined in section 811) received by him after December 31, 1936, with respect to employment (as defined in section 811) after such date:

- (1) With respect to employment during the calendar years 1937, 1938, and 1939, the rate shall be 1 per centum.
- (2) With respect to employment during the calendar years 1940, 1941, and 1942, the rate shall be  $1\frac{1}{2}$  per centum.
- (3) With respect to employment during the calendar years 1943, 1944, and 1945, the rate shall be 2 per centum.
- (4) With respect to employment during the calendar years 1946, 1947, and 1948, the rate shall be  $2\frac{1}{2}$  per centum.
- (5) With respect to employment after December 31, 1948, the rate shall be 3 per centum.

#### DEDUCTION OF TAX FROM WAGES

SEC. 802. (a) The tax imposed by section 801 shall be collected by the employer of the taxpayer, by deducting the amount of the tax from the wages as and when paid. Every employer required so to deduct the tax is hereby made liable for the payment of such tax, and is hereby indemnified against the claims and demands of any person for the amount of any such payment made by such employer.

(b) If more or less than the correct amount of tax imposed by section 801 is paid with respect to any wage payment, then, under regulations made under this title, proper adjustments, with respect both to the tax and the amount to be deducted, shall be made, without interest, in connection with subsequent wage payments to the same individual by the same employer.

#### DEDUCTIBILITY FROM INCOME TAX

SEC. 803. For the purposes of the income tax imposed by Title I of the Revenue Act of 1934 or by any Act of Congress in substitution therefor, the tax imposed by section 801 shall not be allowed as a deduction to the taxpayer in computing his net income for the year in which such tax is deducted from his wages.

#### EXCISE TAX ON EMPLOYERS

SEC. 804. In addition to other taxes, every employer shall pay an excise tax, with respect to having individuals in his employ, equal to the following percentages of the

74th CONGRESS. SESS. I. CH. 531. AUGUST 14, 1935.

wages (as defined in section 811) paid by him after December 31, 1936, with respect to employment (as defined in section 811) after such date:

(1) With respect to employment during the calendar years 1937, 1938, and 1939, the rate shall be 1 per centum.

(2) With respect to employment during the calendar years 1940, 1941, and 1942, the rate shall be 1  $\frac{1}{2}$  per centum.

(3) With respect to employment during the calendar years 1943, 1944, and 1945, the rate shall be 2 per centum.

(4) With respect to employment during the calendar years 1946, 1947, and 1948, the rate shall be 2  $\frac{1}{2}$  per centum.

(5) With respect to employment after December 31, 1948, the rate shall be 3 per centum.

#### ADJUSTMENT OF EMPLOYER'S TAX

SEC. 805. If more or less than the correct amount of tax imposed by section 804 is paid with respect to any wage payment, then, under regulations made under this title, proper adjustments with respect to the tax shall be made, without interest, in connection with subsequent wage payments to the same individual by the same employer.

#### REFUNDS AND DEFICIENCIES

SEC. 806. If more or less than the correct amount of tax imposed by section 801 or 804 is paid or deducted with respect to any wage payment and the overpayment or underpayment of tax cannot be adjusted under section 802 (b) or 805 the amount of the overpayment shall be refunded and the amount of the underpayment shall be collected, in such manner and at such times (subject to the statutes of limitations properly applicable thereto) as may be prescribed by regulations made under this title.

#### COLLECTION AND PAYMENT OF TAXES

SEC. 807. (a) The taxes imposed by this title shall be collected by the Bureau of Internal Revenue under the direction of the Secretary of the Treasury and shall be paid into the Treasury of the United States as internal-revenue collections. If the tax is not paid when due, there shall be added as part of the tax interest (except in the case of adjustments made in accordance with the provisions of sections 802 (b) and 805) at the rate of one-half of 1 per centum per month from the date the tax became due until paid.

(b) Such taxes shall be collected and paid in such manner, at such times, and under such conditions, not inconsistent with this title (either by making and filing returns, or by stamps, coupons, tickets, books, or other reasonable devices or methods necessary or helpful in securing a complete and proper collection and payment of the tax or in securing proper identification of the taxpayer), as may be prescribed by the Commissioner of Internal Revenue, with the approval of the Secretary of the Treasury.

(c) All provisions of law, including penalties, applicable with respect to any tax imposed by section 600 or section 800 of the Revenue Act of 1926, and the provisions of section 607 of the Revenue Act of 1934, shall, insofar as applicable and not inconsistent with the provisions of this title, be applicable with respect to the taxes imposed by this title.

(d) In the payment of any tax under this title a fractional part of a cent shall be disregarded unless it amounts to one-half cent or more, in which case it shall be increased to 1 cent.

#### RULES AND REGULATIONS

SEC. 808. The Commissioner of Internal Revenue, with the approval of the Secretary of the Treasury, shall make and publish rules and regulations for the enforcement of this title.

#### SALE OF STAMPS BY POSTMASTERS

SEC. 809. The Commissioner of Internal Revenue shall furnish to the Postmaster General without prepayment a suitable quantity of stamps, coupons, tickets, books, or other devices prescribed by the Commissioner under section 807 for the collection or payment of any tax imposed by this title, to be distributed to, and kept on sale by, all post offices of the first and second classes, and such post offices of the third and fourth classes as (1) are located in county seats, or (2) are certified by the Secretary of the Treasury to the Postmaster General as necessary to the proper administration of this



title. The Postmaster General may require each such postmaster to furnish bond in such increased amount as he may from time to time determine, and each such postmaster shall deposit the receipts from the sale of such stamps, coupons, tickets, books, or other devices, to the credit of, and render accounts to, the Postmaster General at such times and in such form as the Postmaster General may by regulations prescribe. The Postmaster General shall at least once a month transfer to the Treasury as internal-revenue collections all receipts so deposited together with a statement of the additional expenditures in the District of Columbia and elsewhere incurred by the Post Office Department in performing the duties imposed upon said Department by this Act, and the Secretary of the Treasury is hereby authorized and directed to advance from time to time to the credit of the Post Office Department from appropriations made for the collection of the taxes imposed by this title, such sums as may be required for such additional expenditures incurred by the Post Office Department.

#### PENALTIES

SEC. 810. (a) Whoever buys, sells, offers for sale, uses, transfers, takes or gives in exchange, or pledges or gives in pledge, except as authorized in this title or in regulations made pursuant thereto, any stamp, coupon, ticket, book, or other device, prescribed by the Commissioner of Internal Revenue under section 807 for the collection or payment of any tax imposed by this title, shall be fined not more than \$1,000 or imprisoned for not more than six months, or both.

(b) Whoever, with intent to defraud, alters, forges, makes, or counterfeits any stamp, coupon, ticket, book, or other device prescribed by the Commissioner of Internal Revenue under section 807 for the collection or payment of any tax imposed by this title, or uses, sells, lends or has in his possession any such altered, forged, or counterfeited stamp, coupon, ticket, book, or other device, or makes, uses, sells, or has in his possession any material in imitation of the material used in the manufacture of such stamp, coupon, ticket, book, or other device, shall be fined not more than \$5,000 or imprisoned not more than five years, or both.

#### DEFINITIONS

SEC. 811. When used in this title—

(a) The term "wages" means all remuneration for employment, including the cash value of all remuneration paid in any medium other than cash; except that such term shall not include that part of the remuneration which, after remuneration equal to \$3,000 has been paid to an individual by an employer with respect to employment during any calendar year, is paid to such individual by such employer with respect to employment during such calendar year.

(b) The term "employment" means any service, of whatever nature, performed within the United States by an employee for his employer, except—

- (1) Agricultural labor;
- (2) Domestic service in a private home;
- (3) Casual labor not in the course of the employer's trade or business;
- (4) Service performed by an individual who has attained the age of sixty-five;
- (5) Service performed as an officer or member of the crew of a vessel documented under the laws of the United States or of any foreign country;
- (6) Service performed in the employ of the United States Government or of an instrumentality of the United States;
- (7) Service performed in the employ of a State, a political subdivision thereof, or an instrumentality of one or more States or political subdivisions;
- (8) Service performed in the employ of a corporation, community chest, fund, or foundation, organized and operated exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals, no part of the net earnings of which inures to the benefit of any private shareholder or individual.

## TITLE IX—TAX ON EMPLOYERS OF EIGHT OR MORE

#### IMPOSITION OF TAX

SECTION 901. On and after January 1, 1936, every employer (as defined in section 907) shall pay for each calendar year an excise tax, with respect to having individuals in his employ, equal to the following percentages of the total wages (as defined in section 907) payable by him (regardless of the time of payment) with respect to employment (as defined in section 907) during such calendar year:



- (1) With respect to employment during the calendar year 1936 the rate shall be 1 per centum;
- (2) With respect to employment during the calendar year 1937 the rate shall be 2 per centum;
- (3) With respect to employment after December 31, 1937, the rate shall be 3 per centum.

## CREDIT AGAINST TAX

SEC. 902. The taxpayer may credit against the tax imposed by section 901 the amount of contributions, with respect to employment during the taxable year, paid by him (before the date of filing his return for the taxable year) into an unemployment fund under a State law. The total credit allowed to a taxpayer under this section for all contributions paid into unemployment funds with respect to employment during such taxable year shall not exceed 90 per centum of the tax against which it is credited, and credit shall be allowed only for contributions made under the laws of States certified for the taxable year as provided in section 903.

## CERTIFICATION OF STATE LAWS

SEC. 903. (a) The Social Security Board shall approve any State law submitted to it, within thirty days of such submission, which it finds provides that—

- (1) All compensation is to be paid through public employment offices in the State or such other agencies as the Board may approve;
- (2) No compensation shall be payable with respect to any day of unemployment occurring within two years after the first day of the first period with respect to which contributions are required;
- (3) All money received in the unemployment fund shall immediately upon such receipt be paid over to the Secretary of the Treasury to the credit of the Unemployment Trust Fund established by section 904;
- (4) All money withdrawn from the Unemployment Trust Fund by the State agency shall be used solely in the payment of compensation, exclusive of expenses of administration;
- (5) Compensation shall not be denied in such State to any otherwise eligible individual for refusing to accept new work under any of the following conditions: (A) If the position offered is vacant due directly to a strike, lockout, or other labor dispute; (B) if the wages, hours, or other conditions of the work offered are substantially less favorable to the individual than those prevailing for similar work in the locality; (C) if as a condition of being employed the individual would be required to join a company union or to resign from or refrain from joining any bona fide labor organization;
- (6) All the rights, privileges, or immunities conferred by such law or by acts done pursuant thereto shall exist subject to the power of the legislature to amend or repeal such law at any time.

The Board shall, upon approving such law, notify the Governor of the State of its approval.

(b) On December 31 in each taxable year the Board shall certify to the Secretary of the Treasury each State whose law it has previously approved, except that it shall not certify any State which, after reasonable notice and opportunity for hearing to the State agency, the Board finds has changed its law so that it no longer contains the provisions specified in subsection (a) or has with respect to such taxable year failed to comply substantially with any such provision.

(c) If, at any time during the taxable year, the Board has reason to believe that a State whose law it has previously approved, may not be certified under subsection (b), it shall promptly so notify the Governor of such State.

## UNEMPLOYMENT TRUST FUND

SEC. 904. (a) There is hereby established in the Treasury of the United States a trust fund to be known as the "Unemployment Trust Fund", hereinafter in this title called the "Fund". The Secretary of the Treasury is authorized and directed to receive and hold in the Fund all moneys deposited therein by a State agency from a State unemployment fund. Such deposit may be made directly with the Secretary of the Treasury or with any Federal reserve bank or member bank of the Federal Reserve System designated by him for such purpose.

(b) It shall be the duty of the Secretary of the Treasury to invest such portion of the Fund as is not, in his judgment, required to meet current withdrawals. Such investment may be made only in interest bearing obligations of the United States or in obligations guaranteed as to both principal and interest by the United States. For such

purpose such obligations may be acquired (1) on original issue at par, or (2) by purchase of outstanding obligations at the market price. The purposes for which obligations of the United States may be issued under the Second Liberty Bond Act, as amended, are hereby extended to authorize the issuance at par of special obligations exclusively to the Fund. Such special obligations shall bear interest at a rate equal to the average rate of interest, computed as of the end of the calendar month next preceding the date of such issue, borne by all interest-bearing obligations of the United States then forming part of the public debt; except that where such average rate is not a multiple of one-eighth of 1 per centum, the rate of interest of such special obligations shall be the multiple of one-eighth of 1 per centum next lower than such average rate. Obligations other than such special obligations may be acquired for the Fund only on such terms as to provide an investment yield not less than the yield which would be required in the case of special obligations if issued to the Fund upon the date of such acquisition.

(c) Any obligations acquired by the Fund (except special obligations issued exclusively to the Fund) may be sold at the market price, and such special obligations may be redeemed at par plus accrued interest.

(d) The interest on, and the proceeds from the sale or redemption of, any obligations held in the Fund shall be credited to and form a part of the Fund.

(e) The Fund shall be invested as a single fund, but the Secretary of the Treasury shall maintain a separate book account for each State agency and shall credit quarterly on March 31, June 30, September 30, and December 31, of each year, to each account, on the basis of the average daily balance of such account, a proportionate part of the earnings of the Fund for the quarter ending on such date.

(f) The Secretary of the Treasury is authorized and directed to pay out of the Fund to any State agency such amount as it may duly requisition, not exceeding the amount standing to the account of such State agency at the time of such payment.

#### ADMINISTRATION, REFUNDS, AND PENALTIES

Sec. 905. (a) The tax imposed by this title shall be collected by the Bureau of Internal Revenue under the direction of the Secretary of the Treasury and shall be paid into the Treasury of the United States as internal-revenue collections. If the tax is not paid when due, there shall be added as part of the tax interest at the rate of one-half of 1 per centum per month from the date the tax became due until paid.

(b) Not later than January 31, next following the close of the taxable year, each employer shall make a return of the tax under this title for such taxable year. Each such return shall be made under oath, shall be filed with the collector of internal revenue for the district in which is located the principal place of business of the employer, or, if he has no principal place of business in the United States, then with the collector at Baltimore, Maryland, and shall contain such information and be made in such manner as the Commissioner of Internal Revenue, with the approval of the Secretary of the Treasury, may by regulations prescribe. All provisions of law (including penalties) applicable in respect of the taxes imposed by section 600 of the Revenue Act of 1926, shall, insofar as not inconsistent with this title, be applicable in respect of the tax imposed by this title. The Commissioner may extend the time for filing the return of the tax imposed by this title, under such rules and regulations as he may prescribe with the approval of the Secretary of the Treasury, but no such extension shall be for more than sixty days.

(c) Returns filed under this title shall be open to inspection in the same manner, to the same extent, and subject to the same provisions of law, including penalties, as returns made under Title II of the Revenue Act of 1926.

(d) The taxpayer may elect to pay the tax in four equal installments instead of in a single payment, in which case the first installment shall be paid not later than the last day prescribed for the filing of returns, the second installment shall be paid on or before the last day of the third month, the third installment on or before the last day of the sixth month, and the fourth installment on or before the last day of the ninth month, after such last day. If the tax or any installment thereof is not paid on or before the last day of the period fixed for its payment, the whole amount of the tax unpaid shall be paid upon notice and demand from the collector.

(e) At the request of the taxpayer the time for payment of the tax or any installment thereof may be extended under regulations prescribed by the Commissioner with the approval of the Secretary of the Treasury, for a period not to exceed six months from the last day of the period prescribed for the payment of the tax or any installment thereof. The amount of the tax in respect of which any extension is granted shall be paid (with interest at the rate of one-half of 1 per centum per month) on or before the date of the expiration of the period of the extension.



(f) In the payment of any tax under this title a fractional part of a cent shall be disregarded unless it amounts to one-half cent or more, in which case it shall be increased to 1 cent.

#### INTERSTATE COMMERCE

SEC. 906. No person required under a State law to make payments to an unemployment fund shall be relieved from compliance therewith on the ground that he is engaged in interstate commerce, or that the State law does not distinguish between employees engaged in interstate commerce and those engaged in intrastate commerce.

#### DEFINITIONS

SEC. 907. When used in this title—

(a) The term "employer" does not include any person unless on each of some twenty days during the taxable year, each day being in a different calendar week, the total number of individuals who were in his employ for some portion of the day (whether or not at the same moment of time) was eight or more.

(b) The term "wages" means all remuneration for employment, including the cash value of all remuneration paid in any medium other than cash.

(c) The term "employment" means any service, of whatever nature, performed within the United States by an employee for his employer, except—

(1) Agricultural labor;

(2) Domestic service in a private home;

(3) Service performed as an officer or member of the crew of a vessel on the navigable waters of the United States;

(4) Service performed by an individual in the employ of his son, daughter, or spouse, and service performed by a child under the age of twenty-one in the employ of his father or mother;

(5) Service performed in the employ of the United States Government or of an instrumentality of the United States;

(6) Service performed in the employ of a State, a political subdivision thereof, or an instrumentality of one or more States or political subdivisions;

(7) Service performed in the employ of a corporation, community chest, fund, or foundation, organized and operated exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals, no part of the net earnings of which inures to the benefit of any private shareholder or individual.

(d) The term "State agency" means any State officer, board, or other authority, designated under a State law to administer the unemployment fund in such State.

(e) The term "unemployment fund" means a special fund, established under a State law and administered by a State agency, for the payment of compensation.

(f) The term "contributions" means payments required by a State law to be made by an employer into an unemployment fund, to the extent that such payments are made by him without any part thereof being deducted or deductible from the wages of individuals in his employ.

(g) The term "compensation" means cash benefits payable to individuals with respect to their unemployment.

#### RULES AND REGULATIONS

SEC. 908. The Commissioner of Internal Revenue, with the approval of the Secretary of the Treasury, shall make and publish rules and regulations for the enforcement of this title, except sections 903, 904, and 910.

#### ALLOWANCE OF ADDITIONAL CREDIT

SEC. 909. (a) In addition to the credit allowed under section 902, a taxpayer may, subject to the conditions imposed by section 910, credit against the tax imposed by section 901 for any taxable year after the taxable year 1937, an amount, with respect to each State law, equal to the amount, if any, by which the conditions, with respect to employment in such taxable year, actually paid by the taxpayer under such law before the date of filing his return for such taxable year, is exceeded by whichever of the following is the lesser—

(1) The amount of contributions which he would have been required to pay under such law for such taxable year if he had been subject to the highest rate applicable from time to time throughout such year to any employer under such law; or

(2) Two and seven-tenths per centum of the wages payable by him with respect to employment with respect to which contributions for such year were required under such law.

(b) If the amount of the contributions actually so paid by the taxpayer is less than the amount which he should have paid under the State law, the additional credit under subsection (a) shall be reduced proportionately.

(c) The total credits allowed to a taxpayer under this title shall not exceed 90 per centum of the tax against which such credits are taken.

#### CONDITIONS OF ADDITIONAL CREDIT ALLOWANCE

SEC. 910. (a) A taxpayer shall be allowed the additional credit under section 909, with respect to his contribution rate under a State law being lower, for any taxable year, than that of another employer subject to such law, only if the Board finds that under such law—

(1) Such lower rate, with respect to contributions to a pooled fund, is permitted on the basis of not less than three years of compensation experience;

(2) Such lower rate, with respect to contributions to a guaranteed employment account, is permitted only when his guaranty of employment was fulfilled in the preceding calendar year, and such guaranteed employment account amounts to not less than  $7\frac{1}{2}$  per centum of the total wages payable by him, in accordance with such guaranty, with respect to employment in such State in the preceding calendar year;

(3) Such lower rate, with respect to contributions to a separate reserve account, is permitted only when (A) compensation has been payable from such account throughout the preceding calendar year, and (B) such account amounts to not less than five times the largest amount of compensation paid from such account within any one of the three preceding calendar years, and (C) such account amounts to not less than  $7\frac{1}{2}$  per centum of the total wages payable by him (plus the total wages payable by any other employers who may be contributing to such account) with respect to employment in such State in the preceding calendar year.

(b) Such additional credit shall be reduced, if any contributions under such law are made by such taxpayer at a lower rate under conditions not fulfilling the requirements of subsection (a), by the amount bearing the same ratio to such additional credit as the amount of contributions made at such lower rate bears to the total of his contributions paid for such year under such law.

(c) As used in this section—

(1) The term "reserve account" means a separate account in an unemployment fund, with respect to an employer or group of employers, from which compensation is payable only with respect to the unemployment of individuals who were in the employ of such employer, or of one of the employers comprising the group.

(2) The term "pooled fund" means an unemployment fund or any part thereof in which all contributions are mingled and undivided, and from which compensation is payable to all eligible individuals, except that to individuals last employed by employers with respect to whom reserve accounts are maintained by the State agency, it is payable only when such accounts are exhausted.

(3) The term "guaranteed employment account" means a separate account, in an unemployment fund, of contributions paid by an employer (or group of employers) who

(A) guarantees in advance thirty hours of wages for each of forty calendar weeks (or more, with one weekly hour deducted for each added week guaranteed) in twelve months, to all the individuals in his employ in one or more distinct establishments, except that any such individual's guaranty may commence after a probationary period (included within twelve or less consecutive calendar weeks), and

(B) gives security or assurance, satisfactory to the State agency, for the fulfillment of such guaranties, from which account compensation shall be payable with respect to the unemployment of any such individual whose guaranty is not fulfilled or renewed and who is otherwise eligible for compensation under the State law.

(4) The term "year of compensation experience", as applied to an employer, means any calendar year throughout which compensation was payable with respect to any individual in his employ who became unemployed and was eligible for compensation.



## TITLE X—GRANTS TO STATES FOR AID TO THE BLIND

## APPROPRIATION

SECTION 1001. For the purpose of enabling each State to furnish financial assistance, as far as practicable under the conditions in such State, to needy individuals who are blind, there is hereby authorized to be appropriated for the fiscal year ending June 30, 1936, the sum of \$3,000,000, and there is hereby authorized to be appropriated for each fiscal year thereafter a sum sufficient to carry out the purposes of this title. The sums made available under this section shall be used for making payments to States which have submitted, and had approved by the Social Security Board, State plans for aid to the blind.

## STATE PLANS FOR AID TO THE BLIND

SEC. 1002. (a) A State plan for aid to the blind must (1) provide that it shall be in effect in all political subdivisions of the State, and, if administered by them, be mandatory upon them; (2) provide for financial participation by the State; (3) either provide for the establishment or designation of a single State agency to administer the plan, or provide for the establishment or designation of a single State agency to supervise the administration of the plan; (4) provide for granting to any individual, whose claim for aid is denied, an opportunity for a fair hearing before such State agency; (5) provide such methods of administration (other than those relating to selection, tenure of office, and compensation of personnel) as are found by the Board to be necessary for the efficient operation of the plan; (6) provide that the State agency will make such reports, in such form and containing such information, as the Board may from time to time require, and comply with such provisions as the Board may from time to time find necessary to assure the correctness and verification of such reports; and (7) provide that no aid will be furnished any individual under the plan with respect to any period with respect to which he is receiving old-age assistance under the State plan approved under section 2 of this Act.

(b) The Board shall approve any plan which fulfills the conditions specified in subsection (a), except that it shall not approve any plan which imposes, as a condition of eligibility for aid to the blind under the plan—

(1) Any residence requirement which excludes any resident of the State who has resided therein five years during the nine years immediately preceding the application for aid and has resided therein continuously for one year immediately preceding the application; or

(2) Any citizenship requirement which excludes any citizen of the United States.

## PAYMENT TO STATES

SEC. 1003. (a) From the sums appropriated therefor, the Secretary of the Treasury shall pay to each State which has an approved plan for aid to the blind, for each quarter, beginning with the quarter commencing July 1, 1935, (1) an amount, which shall be used exclusively as aid to the blind, equal to one-half of the total of the sums expended during such quarter as aid to the blind under the State plan with respect to each individual who is blind and is not an inmate of a public institution, not counting so much of such expenditure with respect to any individual for any month as exceeds \$30, and (2) 5 per centum of such amount, which shall be used for paying the costs of administering the State plan or for aid to the blind, or both, and for no other purpose.

(b) The method of computing and paying such amounts shall be as follows:

(1) The Board shall, prior to the beginning of each quarter, estimate the amount to be paid to the State for such quarter under the provisions of clause (1) of subsection (a), such estimate to be based on (A) a report filed by the State containing its estimate of the total sum to be expended in such quarter in accordance with the provisions of such clause, and stating the amount appropriated or made available by the State and its political subdivisions for such expenditures in such quarter, and if such amount is less than one-half of the total sum of such estimated expenditures, the source or sources from which the difference is expected to be derived, (B) records showing the number of blind individuals in the State, and (C) such other investigation as the Board may find necessary.

(2) The Board shall then certify to the Secretary of the Treasury the amount so estimated by the Board, reduced or increased, as the case may be, by any sum by which it finds that its estimate for any prior quarter was greater or less than the amount which should have been paid to the State under clause (1) of subsection (a) for such quarter, except to the extent that such sum has been applied to make the

74th CONGRESS. SESS. I. CH. 531. AUGUST 14, 1935.

amount certified for any prior quarter greater or less than the amount estimated by the Board for such prior quarter.

(3) The Secretary of the Treasury shall thereupon, through the Division of Disbursement of the Treasury Department and prior to audit or settlement by the General Accounting Office, pay to the State, at the time or times fixed by the Board, the amount so certified, increased by 5 per centum.

#### OPERATION OF STATE PLANS

SEC. 1004. In the case of any State plan for aid to the blind which has been approved by the Board, if the Board, after reasonable notice and opportunity for hearing to the State agency administering or supervising the administration of such plan, finds—

(1) that the plan has been so changed as to impose any residence or citizenship requirement prohibited by section 1002 (b), or that in the administration of the plan any such prohibited requirement is imposed, with the knowledge of such State agency, in a substantial number of cases; or

(2) that in the administration of the plan there is a failure to comply substantially with any provision required by section 1002 (a) to be included in the plan;

the Board shall notify such State agency that further payments will not be made to the State until the Board is satisfied that such prohibited requirement is no longer so imposed, and that there is no longer any such failure to comply. Until it is so satisfied it shall make no further certification to the Secretary of the Treasury with respect to such State.

#### ADMINISTRATION

SEC. 1005. There is hereby authorized to be appropriated for the fiscal year ending June 30, 1936, the sum of \$30,000, for all necessary expenses of the Board in administering the provisions of this title.

#### DEFINITION

SEC. 1006. When used in this title the term "aid to the blind" means money payments to blind individuals.

## TITLE XI—GENERAL PROVISIONS

#### DEFINITIONS

SECTION 1101. (a) When used in this Act—

(1) The term "State" (except when used in section 531) includes Alaska, Hawaii, and the District of Columbia.

(2) The term "United States" when used in a geographical sense means the States, Alaska, Hawaii, and the District of Columbia.

(3) The term "person" means an individual, a trust or estate, a partnership, or a corporation.

(4) The term "corporation" includes associations, joint-stock companies, and insurance companies.

(5) The term "shareholder" includes a member in an association, joint-stock company, or insurance company.

(6) The term "employee" includes an officer of a corporation.

(b) The term "includes" and "including" when used in a definition contained in this Act shall not be deemed to exclude other things otherwise within the meaning of the term defined.

(c) Whenever under this Act or any Act of Congress, or under the law of any State, an employer is required or permitted to deduct any amount from the remuneration of an employee and to pay the amount deducted to the United States, a State, or any political subdivision thereof, then for the purposes of this Act the amount so deducted shall be considered to have been paid to the employee at the time of such deduction.

(d) Nothing in this Act shall be construed as authorizing any Federal official, agent, or representative, in carrying out any of the provisions of this Act, to take charge of any child over the objection of either of the parents of such child, or of the person standing in loco parentis to such child.



XXVIII

74th CONGRESS.      SESS. I.      CH. 531.      AUGUST 14, 1935.

RULES AND REGULATIONS

SEC. 1102. The Secretary of the Treasury, the Secretary of Labor, and the Social Security Board, respectively, shall make and publish such rules and regulations, not inconsistent with this Act, as may be necessary to the efficient administration of the functions with which each is charged under this Act.

SEPARABILITY

SEC. 1103. If any provision of this Act, or the application thereof to any person or circumstance, is held invalid, the remainder of the Act, and the application of such provision to other persons or circumstances shall not be affected thereby.

RESERVATION OF POWER

SEC. 1104. The right to alter, amend, or repeal any provision of this Act is hereby reserved to the Congress.

SHORT TITLE

SEC. 1105. This Act may be cited as the "Social Security Act". Approved August 14, 1935.

## Table of Contents

### SUPERSEDED PROVISIONS OF THE SOCIAL SECURITY ACT

Provisions superseded by—

<i>Public Law</i>	<i>Approved</i>	<i>Short Title of Public Law</i>	<i>Page</i>
75-722	06-25-38	Railroad Unemployment Insurance Act.....	1
76-1	02-10-39	【Internal Revenue Code of 1939】 <sup>1</sup> .....	1
76-36	04-19-39	【State Unemployment Compensation— Appropriations】.....	7
76-379	08-10-39	Social Security Act Amendments of 1939.....	7
78-410	07-01-44	Public Health Service Act.....	13
79-719	08-10-46	Social Security Act Amendments of 1946.....	14
80-379	08-06-47	Social Security Act Amendments of 1947.....	15
80-492	04-20-48	【Social Security Act Amendments—April 1948】.....	16
80-642	06-14-48	【Employment Taxes—Social Security Benefits】.....	16
81-174	07-16-49	【Social Security Act—\$1302 Extension】.....	17
81-734	08-28-50	Social Security Act Amendments of 1950.....	17
81-814	09-23-50	Revenue Act of 1950.....	30
82-590	07-18-52	Social Security Act Amendments of 1952.....	31
83-567	08-05-54	Employment Security Administrative Financing Act of 1954.....	36
83-761	09-01-54	Social Security Amendments of 1954.....	37
84-880	08-01-56	Social Security Amendments of 1956.....	44
84-881	08-01-56	Servicemen's and Veterans' Survivor Benefits Act.....	51
85-238	08-30-57	【Social Security Act—Title II Amendments—1957】.....	52
85-239	08-30-57	【Internal Revenue—SEI—Ministers】.....	52
85-840	08-28-58	Social Security Amendments of 1958.....	53
86-442	04-22-60	【Federal Employees—Unemployment Compensation Eligibility】.....	64
86-624	07-12-60	Hawaii Omnibus Act.....	64
86-778	09-13-60	Social Security Amendments of 1960.....	64
87-64	06-30-61	Social Security Amendments of 1961.....	77
87-543	07-25-62	Public Welfare Amendments of 1962.....	81
88-156	10-24-63	Maternal and Child Health and Mental Retardation Planning Amendments of 1963.....	85
88-272	02-26-64	Revenue Act of 1964.....	86
88-650	10-13-64	【Social Security Act Amendments—1964】.....	86
89-97	07-30-65	Social Security Amendments of 1965.....	87
89-554	09-06-66	【Enactment of title 5, United States Code】.....	99
90-248	01-02-68	Social Security Amendments of 1967.....	104
90-364	06-28-68	Revenue and Expenditure Control Act of 1968.....	124
91-41	07-09-69	【Tariff Schedules—Social Security Act Amendments】.....	124
91-53	08-07-69	【Unemployment Security Amendments—1969】.....	125
91-172	12-30-69	Tax Reform Act of 1969.....	125
91-373	08-10-70	Employment Security Amendments of 1970.....	130
91-452	10-15-70	Organized Crime Control Act of 1970.....	132
92-5	03-17-71	【Public Debt Limit—Social Security Wage Base】.....	133
92-223	12-28-71	【Social Security—Lump-Sum Death Payment】.....	137

<sup>1</sup>Information within 【 】 is supplied.

## SUPERSEDED PROVISIONS OF THE SOCIAL SECURITY ACT (Cont.)

Provisions superseded by—

<i>Public Law</i>	<i>Approved</i>	<i>Short Title of Public Law</i>	<i>Page</i>
92-336	07-01-72	【Public Debt Limit—Extension】 .....	140
92-512	10-20-72	【Limitation on Grants】 .....	146
92-603	10-30-72	Social Security Amendments of 1972 .....	146
93-66	07-09-73	【Cost-of-Living Increase in Social Security Benefits】 ..	155
93-233	12-31-73	【Social Security Benefits—Increase】 .....	156
93-368	08-07-74	【Vessels—Equipment and Repairs—Emergency Un- employment Compensation】 .....	165
93-484	10-26-74	【Tariffs—Medicare Appeals】 .....	165
93-608	01-02-75	【Reports to Congress】 .....	166
93-647	01-04-75	Social Services Amendments of 1974 .....	166
40 FR 22289 <sup>1</sup>	05-22-75	【Cost-of-Living Increase】 .....	172
94-44	06-28-75	【Social Security—Temporary Assistance】 .....	178
94-88	08-09-75	【Tariffs—Social Security】 .....	178
94-182	12-31-75	【Social Security—Medicare】 .....	178
94-202	01-02-76	【Social Security—Hearings and Review Procedures】 ..	179
94-273	04-21-76	Fiscal Year Adjustment Act .....	180
41 FR 19999	05-14-76	【Cost-of-Living Increase】 .....	181
94-365	07-14-76	【Social Security—Report to Congress】 .....	186
94-460	10-08-76	Health Maintenance Organization Amendments of 1976 .....	187
94-552	10-18-76	【Social Security—Medical Assistance】 .....	188
94-566	10-20-76	Unemployment Compensation Amendments of 1976 .....	188
42 FR 24210	05-12-77	【Cost-of-Living Increase】 .....	189
95-30	05-23-77	Tax Reduction and Simplification Act of 1977 .....	196
95-83	08-01-77	【Public Health Service Act—Medicaid】 .....	196
95-142	10-25-77	Medicare-Medicaid Anti-Fraud and Abuse Amendments .....	196
95-210	12-13-77	【Social Security—Rural Health Clinic Services】 .....	199
95-216	12-20-77	Social Security Amendments of 1977 .....	200
43 FR 20867	05-15-78	【Cost-of-Living Increase】 .....	209
95-292	06-13-78	【Social Security—End Stage Renal Disease Program】	216
95-598	11-06-78	【Title 11, U.S.C.—Bankruptcy—Child Support】 .....	216
43 FR 53504	11-16-78	【Cost-of-Living Increase; Extension】 .....	217
44 FR 28423	05-15-79	【Cost-of-Living Increase】 .....	218
44 FR 62956	11-01-79	【Cost-of-Living Increase; Extension】 .....	225
45 FR 31781	05-14-80	【Cost-of-Living Increase】 .....	228
96-265	06-09-80	Social Security Disability Amendments of 1980 .....	237
96-272	06-17-80	Adoption Assistance and Child Welfare Act of 1980 .....	238
96-403	10-09-80	【Social Security Tax Receipts—Allocation】 .....	243
96-473	10-19-80	【Social Security Act Retirement Test Amendment】 ....	243
45 FR 76252	11-18-80	【Cost-of-Living Increase; Extension】 .....	244
96-499	12-05-80	Omnibus Reconciliation Act of 1980 .....	245

<sup>1</sup>Federal Register cite.

## SUPERSEDED PROVISIONS OF THE SOCIAL SECURITY ACT (Cont.)

Provisions superseded by—

<i>Public Law</i>	<i>Approved</i>	<i>Short Title of Public Law</i>	<i>Page</i>
46 FR 27076	05-15-81	<b>【Cost-of-Living Increase】</b> .....	250
97-35	08-13-81	Omnibus Budget Reconciliation Act of 1981 .....	261
46 FR 53791	10-30-81	<b>【Cost-of-Living Increase; Extension】</b> .....	307
97-123	12-29-81	<b>【Amendments to P.L. 97-35】</b> .....	308
47 FR 20863	05-14-82	<b>【Cost-of-Living Increase】</b> .....	310
97-248	09-03-82	Tax Equity and Fiscal Responsibility Act of 1982 .....	321
97-300	10-13-82	Job Training Partnership Act .....	345
47 FR 51003	11-10-82	<b>【Cost-of-Living Increase; Extension】</b> .....	345
97-375	12-21-82	Congressional Reports Elimination Act of 1982 .....	347
97-448	01-12-83	Technical Corrections Act of 1982 .....	347
98-21	04-20-83	Social Security Amendments of 1983 .....	347
48 FR 27151	06-13-83	<b>【Cost-of-Living Increase】</b> .....	355
98-90	08-29-83	<b>【Social Security Act—Title XVIII Amendments— 1983】</b> .....	368
98-135	10-24-83	Federal Supplemental Compensation Amendments of 1983 .....	369
48 FR 50414	11-01-83	<b>【Cost-of-Living Increase; Extension】</b> .....	369
98-369	07-18-84	Deficit Reduction Act of 1984 .....	371
98-378	08-16-84	Child Support Enforcement Amendments of 1984 .....	380
98-460	10-09-84	Social Security Disability Benefits Reform Act of 1984 .	380
49 FR 43775	10-31-84	<b>【Cost-of-Living Increase】</b> .....	381
98-620	11-08-84	<b>【Title IV—Federal Courts Improvements】</b> .....	397
50 FR 45558	10-31-85	<b>【Cost-of-Living Increase】</b> .....	397



## SUPERSEDED PROVISIONS OF THE SOCIAL SECURITY ACT

Table of Contents  
Provisions of Social Security Act in Effect Before

	Page
Adoption Assistance and Child Welfare Act of 1980; P.L. 96-272 .....	238
<b>[Amendments to P.L. 97-35]<sup>1</sup>; P.L. 97-123 .....</b>	<b>308</b>
Child Support Enforcement Amendments of 1984; P.L. 98-378 .....	380
Congressional Reports Elimination Act of 1982; P.L. 97-375 .....	347
<b>[Cost-of-Living Increase]; 40 FR 22289 .....</b>	<b>172</b>
<b>[Cost-of-Living Increase]; 41 FR 19999 .....</b>	<b>181</b>
<b>[Cost-of-Living Increase]; 42 FR 24210 .....</b>	<b>189</b>
<b>[Cost-of-Living Increase]; 43 FR 20867 .....</b>	<b>209</b>
<b>[Cost-of-Living Increase]; 44 FR 28423 .....</b>	<b>218</b>
<b>[Cost-of-Living Increase]; 45 FR 31781 .....</b>	<b>228</b>
<b>[Cost-of-Living Increase]; 46 FR 27076 .....</b>	<b>250</b>
<b>[Cost-of-Living Increase]; 47 FR 20863 .....</b>	<b>310</b>
<b>[Cost-of-Living Increase]; 48 FR 27151 .....</b>	<b>355</b>
<b>[Cost-of-Living Increase]; 49 FR 43775 .....</b>	<b>381</b>
<b>[Cost-of-Living Increase]; 50 FR 45558 .....</b>	<b>397</b>
<b>[Cost-of-Living Increase; Extension]; 43 FR 53504 .....</b>	<b>217</b>
<b>[Cost-of-Living Increase; Extension]; 44 FR 62956 .....</b>	<b>225</b>
<b>[Cost-of-Living Increase; Extension]; 45 FR 76252 .....</b>	<b>244</b>
<b>[Cost-of-Living Increase; Extension]; 46 FR 53791 .....</b>	<b>307</b>
<b>[Cost-of-Living Increase; Extension]; 47 FR 51003 .....</b>	<b>345</b>
<b>[Cost-of-Living Increase; Extension]; 48 FR 50414 .....</b>	<b>369</b>
<b>[Cost-of-Living Increase in Social Security Benefits]; P.L. 93-66 .....</b>	<b>155</b>
Deficit Reduction Act of 1984; P.L. 98-369 .....	371
Employment Security Administrative Financing Act of 1954; P.L. 83-567 .....	36
Employment Security Amendments of 1970; P.L. 91-373 .....	130
<b>[Employment Taxes—Social Security Benefits]; P.L. 80-642 .....</b>	<b>16</b>
<b>[Enactment of title 5, United States Code]; P.L. 89-554 .....</b>	<b>99</b>
<b>[Federal Employees—Unemployment Compensation Eligibility]; P.L. 86-442 .....</b>	<b>64</b>
Federal Supplemental Compensation Amendments of 1983; P.L. 98-135 .....	369
Fiscal Year Adjustment Act; P.L. 94-273 .....	180
Hawaii Omnibus Act; P.L. 86-624 .....	64
Health Maintenance Organization Amendments of 1976; P.L. 94-460 .....	187
<b>[Internal Revenue Code of 1939]; P.L. 76-1 .....</b>	<b>1</b>
<b>[Internal Revenue—SEI—Ministers]; P.L. 85-239 .....</b>	<b>52</b>
Job Training Partnership Act; P.L. 97-300 .....	345
<b>[Limitation on Grants]; P.L. 92-512 .....</b>	<b>146</b>
Maternal and Child Health and Mental Retardation Planning Amendments of 1963; P.L. 88-156 .....	85
Medicare-Medicaid Anti-Fraud and Abuse Amendments; P.L. 95-142 .....	196
Omnibus Budget Reconciliation Act of 1981; P.L. 97-35 .....	261
Omnibus Reconciliation Act of 1980; P.L. 96-499 .....	245
Organized Crime Control Act of 1970; P.L. 91-452 .....	132
<b>[Public Debt Limit—Social Security Wage Base]; P.L. 92-5 .....</b>	<b>133</b>
<b>[Public Debt Limit—Extension]; P.L. 92-336 .....</b>	<b>140</b>
Public Health Service Act; P.L. 78-410 .....	13
<b>[Public Health Service Act—Medicaid]; P.L. 95-83 .....</b>	<b>196</b>
Public Welfare Amendments of 1962; P.L. 87-543 .....	81
Railroad Unemployment Insurance Act; P.L. 75-722 .....	1
<b>[Reports to Congress]; P.L. 93-608 .....</b>	<b>166</b>
Revenue Act of 1950; P.L. 81-814 .....	30
Revenue Act of 1964; P.L. 88-272 .....	86

<sup>1</sup>Information within [ ] is supplied.



## Provisions of Social Security Act in Effect Before (Cont.)

	Page
Revenue and Expenditure Control Act of 1968; P.L. 90-364 .....	124
Servicemen's and Veterans' Survivor Benefits Act; P.L. 84-881 .....	51
Social Security Act Amendments of 1939; P.L. 76-379 .....	7
Social Security Act Amendments of 1946; P.L. 79-719 .....	14
Social Security Act Amendments of 1947; P.L. 80-379 .....	15
Social Security Act Amendments of 1950; P.L. 81-734 .....	17
Social Security Act Amendments of 1952; P.L. 82-590 .....	31
<b>[Social Security Act Amendments—April 1948]; P.L. 80-492 .....</b>	<b>16</b>
<b>[Social Security Act Amendments—1964]; P.L. 88-650 .....</b>	<b>86</b>
<b>[Social Security Act Retirement Test Amendment]; P.L. 96-473 .....</b>	<b>243</b>
<b>[Social Security Act—§1302 Extension]; P.L. 81-174 .....</b>	<b>17</b>
<b>[Social Security Act—Title II Amendments—1957]; P.L. 85-238 .....</b>	<b>52</b>
<b>[Social Security Act—Title XVIII Amendments—1983]; P.L. 98-90 .....</b>	<b>368</b>
Social Security Amendments of 1954; P.L. 83-761 .....	37
Social Security Amendments of 1956; P.L. 84-880 .....	44
Social Security Amendments of 1958; P.L. 85-840 .....	53
Social Security Amendments of 1960; P.L. 86-778 .....	64
Social Security Amendments of 1961; P.L. 87-64 .....	77
Social Security Amendments of 1965; P.L. 89-97 .....	87
Social Security Amendments of 1967; P.L. 90-248 .....	104
Social Security Amendments of 1972; P.L. 92-603 .....	146
Social Security Amendments of 1977; P.L. 95-216 .....	200
Social Security Amendments of 1983; P.L. 98-21 .....	347
<b>[Social Security Benefits—Increase]; P.L. 93-233 .....</b>	<b>156</b>
Social Security Disability Amendments of 1980; P.L. 96-265 .....	237
Social Security Disability Benefits Reform Act of 1984; P.L. 98-460 .....	380
<b>[Social Security—End Stage Renal Disease Program]; P.L. 95-292 .....</b>	<b>216</b>
<b>[Social Security—Hearings and Review Procedures]; P.L. 94-202 .....</b>	<b>179</b>
<b>[Social Security—Lump-Sum Death Payment]; P.L. 92-223 .....</b>	<b>137</b>
<b>[Social Security—Medical Assistance]; P.L. 94-552 .....</b>	<b>188</b>
<b>[Social Security—Medicare]; P.L. 94-182 .....</b>	<b>178</b>
<b>[Social Security—Report to Congress]; P.L. 94-365 .....</b>	<b>186</b>
<b>[Social Security—Rural Health Clinic Services]; P.L. 95-210 .....</b>	<b>199</b>
<b>[Social Security Tax Receipts—Allocation]; P.L. 96-403 .....</b>	<b>243</b>
<b>[Social Security—Temporary Assistance]; P.L. 94-44 .....</b>	<b>178</b>
Social Services Amendments of 1974; P.L. 93-647 .....	166
<b>[State Unemployment Compensation—Appropriations]; P.L. 76-36 .....</b>	<b>7</b>
<b>[Tariff Schedules—Social Security Act Amendments]; P.L. 91-41 .....</b>	<b>124</b>
<b>[Tariffs—Medicare Appeals]; P.L. 93-484 .....</b>	<b>165</b>
<b>[Tariffs—Social Security]; P.L. 94-88 .....</b>	<b>178</b>
Tax Equity and Fiscal Responsibility Act of 1982; P.L. 97-248 .....	321
Tax Reduction and Simplification Act of 1977; P.L. 95-30 .....	196
Tax Reform Act of 1969; P.L. 91-172 .....	125
Technical Corrections Act of 1982; P.L. 97-448 .....	347
<b>[Title IV—Federal Courts Improvements]; P.L. 98-620 .....</b>	<b>397</b>
<b>[Title 11, U.S.C.—Bankruptcy—Child—Support]; P.L. 95-598 .....</b>	<b>216</b>
Unemployment Compensation Amendments of 1976; P.L. 94-566 .....	188
<b>[Unemployment Security Amendments—1969]; P.L. 91-53 .....</b>	<b>125</b>
<b>[Vessels—Equipment and Repairs—Emergency Unemployment Compensation]; P.L. 93-368 .....</b>	<b>165</b>



---

---

**SUPERSEDED PROVISIONS OF THE SOCIAL  
SECURITY ACT**

---

---

(XXXV)





**Provisions of the Social Security Act as in Effect Prior to  
P.L. 75-722, Approved June 25, 1938 (52 Stat. 1094)  
Railroad Unemployment Insurance Act**

SEC. 904. (a) There is hereby established in the Treasury of the United States a trust fund to be known as the "Unemployment Trust Fund", hereinafter in this title called the "Fund". The Secretary of the Treasury is authorized and directed to receive and hold in the Fund all moneys deposited therein by a State agency from a State unemployment fund. Such deposit may be made directly with the Secretary of the Treasury or with any Federal reserve bank or member bank of the Federal Reserve System designated by him for such purpose.

(e) The Fund shall be invested as a single fund, but the Secretary of the Treasury shall maintain a separate book account for each State agency and shall credit quarterly on March 31, June 30, September 30, and December 31, of each year, to each account, on the basis of the average daily balance of such account, a proportionate part of the earnings of the Fund for the quarter ending on such date.

---

**Provisions of the Social Security Act as in Effect Prior to  
P.L. 76-1, Approved February 10, 1939 (53 Stat. 1)  
[Internal Revenue Code of 1939]**

**TITLE VIII—TAXES WITH RESPECT TO EMPLOYMENT**

**INCOME TAX ON EMPLOYEES**

SECTION. 801. In addition to other taxes, there shall be levied, collected, and paid upon the income of every individual a tax equal to the following percentages of the wages (as defined in section 811) received by him after December 31, 1936, with respect to employment (as defined in section 811) after such date:

(1) With respect to employment during the calendar years 1937, 1938, and 1939, the rate shall be 1 per centum.

(2) With respect to employment during the calendar years 1940, 1941, and 1942, the rate shall be 1  $\frac{1}{2}$  per centum.

(3) With respect to employment during the calendar years 1943, 1944, and 1945, the rate shall be 2 per centum.

(4) With respect to employment during the calendar years 1946, 1947, and 1948, the rate shall be 2  $\frac{1}{2}$  per centum.

(5) With respect to employment after December 31, 1948, the rate shall be 3 per centum.

**DEDUCTION OF TAX FROM WAGES**

SEC. 802. (a) The tax imposed by section 801 shall be collected by the employer of the taxpayer, by deducting the amount of the tax from the wages as and when paid. Every employer required so to deduct the tax is hereby made liable for the payment of such tax, and is hereby indemnified against the claims and demands of any person for the amount of any such payment made by such employer.

(b) If more or less than the correct amount of tax imposed by section 801 is paid with respect to any wage payment, then, under regulations made under this title, proper adjustments, with respect both to the tax and the amount to be deducted, shall be made, without interest, in connection with subsequent wage payments to the same individual by the same employer.

**DEDUCTIBILITY FROM INCOME TAX**

SEC. 803. For the purposes of the income tax imposed by Title I of the Revenue Act of 1934 or by any Act of Congress in substitution therefor, the tax imposed by section 801 shall not be allowed as a deduction to the taxpayer in computing his net income for the year in which such tax is deducted from his wages.

## EXCISE TAX ON EMPLOYERS

SEC. 804. In addition to other taxes, every employer shall pay an excise tax, with respect to having individuals in his employ, equal to the following percentages of the wages (as defined in section 811) paid by him after December 31, 1936, with respect to employment (as defined in section 811) after such date:

(1) With respect to employment during the calendar years 1937, 1938, and 1939, the rate shall be 1 per centum.

(2) With respect to employment during the calendar years 1940, 1941, and 1942, the rate shall be 1  $\frac{1}{2}$  per centum.

(3) With respect to employment during the calendar years 1943, 1944, and 1945, the rate shall be 2 per centum.

(4) With respect to employment during the calendar years 1946, 1947, and 1948, the rate shall be 2  $\frac{1}{2}$  per centum.

(5) With respect to employment after December 31, 1948, the rate shall be 3 per centum.

## ADJUSTMENT OF EMPLOYER'S TAX

SEC. 805. If more or less than the correct amount of tax imposed by section 804 is paid with respect to any wage payment, then, under regulations made under this title, proper adjustments with respect to the tax shall be made, without interest, in connection with subsequent wage payments to the same individual by the same employer.

## REFUNDS AND DEFICIENCIES

SEC. 806. If more or less than the correct amount of tax imposed by section 801 or 804 is paid or deducted with respect to any wage payment and the overpayment or underpayment of tax cannot be adjusted under section 802 (b) or 805 the amount of the overpayment shall be refunded and the amount of the underpayment shall be collected, in such manner and at such times (subject to the statutes of limitations properly applicable thereto) as may be prescribed by regulations made under this title.

## COLLECTION AND PAYMENT OF TAXES

SEC. 807. (a) The taxes imposed by this title shall be collected by the Bureau of Internal Revenue under the direction of the Secretary of the Treasury and shall be paid into the Treasury of the United States as internal-revenue collections. If the tax is not paid when due, there shall be added as part of the tax interest (except in the case of adjustments made in accordance with the provisions of sections 802 (b) and 805) at the rate of one-half of 1 per centum per month from the date the tax became due until paid.

(b) Such taxes shall be collected and paid in such manner, at such times, and under such conditions, not inconsistent with this title (either by making and filing returns, or by stamps, coupons, tickets, books, or other reasonable devices or methods necessary or helpful in securing a complete and proper collection and payment of the tax or in securing proper identification of the taxpayer), as may be prescribed by the Commissioner of Internal Revenue, with the approval of the Secretary of the Treasury.

(c) All provisions of law, including penalties, applicable with respect to any tax imposed by section 600 or section 800 of the Revenue Act of 1926, and the provisions of section 607 of the Revenue Act of 1934, shall, insofar as applicable and not inconsistent with the provisions of this title, be applicable with respect to the taxes imposed by this title.

(d) In the payment of any tax under this title a fractional part of a cent shall be disregarded unless it amounts to one-half cent or more, in which case it shall be increased to 1 cent.

## RULES AND REGULATIONS

SEC. 808. The Commissioner of Internal Revenue, with the approval of the Secretary of the Treasury, shall make and publish rules and regulations for the enforcement of this title.

## SALE OF STAMPS BY POSTMASTERS

SEC. 809. The Commissioner of Internal Revenue shall furnish to the Postmaster General without prepayment a suitable quantity of stamps, coupons, tickets, books, or other devices prescribed by the Commissioner under section 807 for the collection or payment of any tax imposed by this title, to be distributed to, and kept on sale by, all



post offices of the first and second classes, and such post offices of the third and fourth classes as (1) are located in county seats, or (2) are certified by the Secretary of the Treasury to the Postmaster General as necessary to the proper administration of this title. The Postmaster General may require each such postmaster to furnish bond in such increased amount as he may from time to time determine, and each such postmaster shall deposit the receipts from the sale of such stamps, coupons, tickets, books, or other devices, to the credit of, and render accounts to, the Postmaster General at such times and in such form as the Postmaster General may by regulations prescribe. The Postmaster General shall at least once a month transfer to the Treasury as internal-revenue collections all receipts so deposited together with a statement of the additional expenditures in the District of Columbia and elsewhere incurred by the Post Office Department in performing the duties imposed upon said Department by this Act, and the Secretary of the Treasury is hereby authorized and directed to advance from time to time to the credit of the Post Office Department from appropriations made for the collection of the taxes imposed by this title, such sums as may be required for such additional expenditures incurred by the Post Office Department.

## PENALTIES

SEC. 810. (a) Whoever buys, sells, offers for sale, uses, transfers, takes or gives in exchange, or pledges or gives in pledge, except as authorized in this title or in regulations made pursuant thereto, any stamp, coupon, ticket, book, or other device, prescribed by the Commissioner of Internal Revenue under section 807 for the collection or payment of any tax imposed by this title, shall be fined not more than \$1,000 or imprisoned for not more than six months, or both.

(b) Whoever, with intent to defraud, alters, forges, makes, or counterfeits any stamp, coupon, ticket, book, or other device prescribed by the Commissioner of Internal Revenue under section 807 for the collection or payment of any tax imposed by this title, or uses, sells, lends, or has in his possession any such altered, forged, or counterfeited stamp, coupon, ticket, book, or other device, or makes, uses, sells, or has in his possession any material in imitation of the material used in the manufacture of such stamp, coupon, ticket, book, or other device, shall be fined not more than \$5,000 or imprisoned not more than five years, or both.

## DEFINITIONS

SEC. 811. When used in this title—

(a) The term "wages" means all remuneration for employment, including the cash value of all remuneration paid in any medium other than cash; except that such term shall not include that part of the remuneration which, after remuneration equal to \$3,000 has been paid to an individual by an employer with respect to employment during any calendar year, is paid to such individual by such employer with respect to employment during such calendar year.

(b) The term "employment" means any service, of whatever nature, performed within the United States by an employee for his employer, except—

- (1) Agricultural labor;
- (2) Domestic service in a private home;
- (3) Casual labor not in the course of the employer's trade or business;
- (4) Service performed by an individual who has attained the age of sixty-five;
- (5) Service performed as an officer or member of the crew of a vessel documented under the laws of the United States or of any foreign country;
- (6) Service performed in the employ of the United States Government or of an instrumentality of the United States;
- (7) Service performed in the employ of a State, a political subdivision thereof, or an instrumentality of one or more States or political subdivisions;
- (8) Service performed in the employ of a corporation, community chest, fund, or foundation, organized and operated exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals, no part of the net earnings of which inures to the benefit of any private shareholder or individual.

## IMPOSITION OF TAX

SECTION 901. On and after January 1, 1936, every employer (as defined in section 907) shall pay for each calendar year an excise tax, with respect to having individuals in his employ, equal to the following percentages of the total wages (as defined in section 907) payable by him (regardless of the time of payment) with respect to employment (as defined in section 907) during such calendar year:

# SUPERSEDED PROVISIONS—SOCIAL SECURITY ACT

4 P.L. 76-1 §902.

337 03/86

- (1) With respect to employment during the calendar year 1936 the rate shall be 1 per centum;
- (2) With respect to employment during the calendar year 1937 the rate shall be 2 per centum;
- (3) With respect to employment after December 31, 1937, the rate shall be 3 per centum.

## CREDIT AGAINST TAX

SEC. 902. The taxpayer may credit against the tax imposed by section 901 the amount of contributions, with respect to employment during the taxable year, paid by him (before the date of filing his return for the taxable year) into an unemployment fund under a State law. The total credit allowed to a taxpayer under this section for all contributions paid into unemployment funds with respect to employment during such taxable year shall not exceed 90 per centum of the tax against which it is credited, and credit shall be allowed only for contributions made under the laws of States certified for the taxable year as provided in section 903.

## CERTIFICATION OF STATE LAWS

SEC. 903. (a) The Social Security Board shall approve any State law submitted to it, within thirty days of such submission, which it finds provides that—

- (1) All compensation is to be paid through public employment offices in the State or such other agencies as the Board may approve;
- (2) No compensation shall be payable with respect to any day of unemployment occurring within two years after the first day of the first period with respect to which contributions are required;
- (3) All money received in the unemployment fund shall immediately upon such receipt be paid over to the Secretary of the Treasury to the credit of the Unemployment Trust Fund established by section 904;
- (4) All money withdrawn from the Unemployment Trust Fund by the State agency shall be used solely in the payment of compensation, exclusive of expenses of administration;
- (5) Compensation shall not be denied in such State to any otherwise eligible individual for refusing to accept new work under any of the following conditions: (A) If the position offered is vacant due directly to a strike, lockout, or other labor dispute; (B) if the wages, hours, or other conditions of the work offered are substantially less favorable to the individual than those prevailing for similar work in the locality; (C) if as a condition of being employed the individual would be required to join a company union or to resign from or refrain from joining any bona fide labor organization;
- (6) All the rights, privileges, or immunities conferred by such law or by acts done pursuant thereto shall exist subject to the power of the legislature to amend or repeal such law at any time.

The Board shall, upon approving such law, notify the Governor of the State of its approval.

(b) On December 31 in each taxable year the Board shall certify to the Secretary of the Treasury each State whose law it has previously approved, except that it shall not certify any State which, after reasonable notice and opportunity for hearing to the State agency, the Board finds has changed its law so that it no longer contains the provisions specified in subsection (a) or has with respect to such taxable year failed to comply substantially with any such provision.

(c) If, at any time during the taxable year, the Board has reason to believe that a State whose law it has previously approved, may not be certified under subsection (b), it shall promptly so notify the Governor of such State.

## ADMINISTRATION, REFUNDS, AND PENALTIES

SEC. 905. (a) The tax imposed by this title shall be collected by the Bureau of Internal Revenue under the direction of the Secretary of the Treasury and shall be paid into the Treasury of the United States as internal-revenue collections. If the tax is not paid when due, there shall be added as part of the tax interest at the rate of one-half of 1 per centum per month from the date the tax became due until paid.

(b) Not later than January 31, next following the close of the taxable year, each employer shall make a return of the tax under this title for such taxable year. Each such return shall be made under oath, shall be filed with the collector of internal revenue for the district in which is located the principal place of business of the employer, or, if he has no principal place of business in the United States, then with the collector at Baltimore, Maryland, and shall contain such information and be made



in such manner as the Commissioner of Internal Revenue, with the approval of the Secretary of the Treasury, may by regulations prescribe. All provisions of law (including penalties) applicable in respect of the taxes imposed by section 600 of the Revenue Act of 1926, shall, insofar as not inconsistent with this title, be applicable in respect of the tax imposed by this title. The Commissioner may extend the time for filing the return of the tax imposed by this title, under such rules and regulations as he may prescribe with the approval of the Secretary of the Treasury, but no such extension shall be for more than sixty days.

(c) Returns filed under this title shall be open to inspection in the same manner, to the same extent, and subject to the same provisions of law, including penalties, as returns made under Title II of the Revenue Act of 1926.

(d) The taxpayer may elect to pay the tax in four equal installments instead of in a single payment, in which case the first installment shall be paid not later than the last day prescribed for the filing of returns, the second installment shall be paid on or before the last day of the third month, the third installment on or before the last day of the sixth month, and the fourth installment on or before the last day of the ninth month, after such last day. If the tax or any installment thereof is not paid on or before the last day of the period fixed for its payment, the whole amount of the tax unpaid shall be paid upon notice and demand from the collector.

(e) At the request of the taxpayer the time for payment of the tax or any installment thereof may be extended under regulations prescribed by the Commissioner with the approval of the Secretary of the Treasury, for a period not to exceed six months from the last day of the period prescribed for the payment of the tax or any installment thereof. The amount of the tax in respect of which any extension is granted shall be paid (with interest at the rate of one-half of 1 per centum per month) on or before the date of the expiration of the period of the extension.

(f) In the payment of any tax under this title a fractional part of a cent shall be disregarded unless it amounts to one-half cent or more, in which case it shall be increased to 1 cent.

#### INTERSTATE COMMERCE

SEC. 906. No person required under a State law to make payments to an unemployment fund shall be relieved from compliance therewith on the ground that he is engaged in interstate commerce, or that the State law does not distinguish between employees engaged in interstate commerce and those engaged in intrastate commerce.

#### DEFINITIONS

SEC. 907. When used in this title—

(a) The term "employer" does not include any person unless on each of some twenty days during the taxable year, each day being in a different calendar week, the total number of individuals who were in his employ for some portion of the day (whether or not at the same moment of time) was eight or more.

(b) The term "wages" means all remuneration for employment, including the cash value of all remuneration paid in any medium other than cash.

(c) The term "employment" means any service, of whatever nature, performed within the United States by an employee for his employer, except—

(1) Agricultural labor;

(2) Domestic service in a private home;

(3) Service performed as an officer or member of the crew of a vessel on the navigable waters of the United States;

(4) Service performed by an individual in the employ of his son, daughter, or spouse, and service performed by a child under the age of twenty-one in the employ of his father or mother;

(5) Service performed in the employ of the United States Government or of an instrumentality of the United States;

(6) Service performed in the employ of a State, a political subdivision thereof, or an instrumentality of one or more States or political subdivisions;

(7) Service performed in the employ of a corporation, community chest, fund, or foundation, organized and operated exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals, no part of the net earnings of which inures to the benefit of any private shareholder or individual;

(8) service<sup>1</sup> performed in the employ of an employer as defined in the Railroad Unemployment Insurance Act and service performed as an employee representative as defined in said Act.

<sup>1</sup>As in original. Should be capitalized.



(d) The term "State agency" means any State officer, board, or other authority, designated under a State law to administer the unemployment fund in such State.

(e) The term "unemployment fund" means a special fund, established under a State law and administered by a State agency, for the payment of compensation.

(f) The term "contributions" means payments required by a State law to be made by an employer into an unemployment fund, to the extent that such payments are made by him without any part thereof being deducted or deductible from the wages of individuals in his employ.

(g) The term "compensation" means cash benefits payable to individuals with respect to their unemployment.

#### RULES AND REGULATIONS

SEC. 908. The Commissioner of Internal Revenue, with the approval of the Secretary of the Treasury, shall make and publish rules and regulations for the enforcement of this title, except sections 903, 904, and 910.

#### ALLOWANCE OF ADDITIONAL CREDIT

SEC. 909. (a) In addition to the credit allowed under section 902, a taxpayer may, subject to the conditions imposed by section 910, credit against the tax imposed by section 901 for any taxable year after the taxable year 1937, an amount, with respect to each State law, equal to the amount, if any, by which the contributions, with respect to employment in such taxable year, actually paid by the taxpayer under such law before the date of filing his return for such taxable year, is exceeded by whichever of the following is the lesser—

(1) The amount of contributions which he would have been required to pay under such law for such taxable year if he had been subject to the highest rate applicable from time to time throughout such year to any employer under such law; or

(2) Two and seven-tenths per centum of the wages payable by him with respect to employment with respect to which contributions for such year were required under such law.

(b) If the amount of the contributions actually so paid by the taxpayer is less than the amount which he should have paid under the State law, the additional credit under subsection (a) shall be reduced proportionately.

(c) The total credits allowed to a taxpayer under this title shall not exceed 90 per centum of the tax against which such credits are taken.

#### CONDITIONS OF ADDITIONAL CREDIT ALLOWANCE

SEC. 910. (a) A taxpayer shall be allowed the additional credit under section 909, with respect to his contribution rate under a State law being lower, for any taxable year, than that of another employer subject to such law, only if the Board finds that under such law—

(1) Such lower rate, with respect to contributions to a pooled fund, is permitted on the basis of not less than three years of compensation experience;

(2) Such lower rate, with respect to contributions to a guaranteed employment account, is permitted only when his guaranty of employment was fulfilled in the preceding calendar year, and such guaranteed employment account amounts to not less than  $7\frac{1}{2}$  per centum of the total wages payable by him, in accordance with such guaranty, with respect to employment in such State in the preceding calendar year;

(3) Such lower rate, with respect to contributions to a separate reserve account, is permitted only when (A) compensation has been payable from such account throughout the preceding calendar year, and (B) such account amounts to not less than five times the largest amount of compensation paid from such account within any one of the three preceding calendar years, and (C) such account amounts to not less than  $7\frac{1}{2}$  per centum of the total wages payable by him (plus the total wages payable by any other employers who may be contributing to such account) with respect to employment in such State in the preceding calendar year.

(b) Such additional credit shall be reduced, if any contributions under such law are made by such taxpayer at a lower rate under conditions not fulfilling the requirements of subsection (a), by the amount bearing the same ratio to such additional credit as the amount of contributions made at such lower rate bears to the total of his contributions paid for such year under such law.

(c) As used in this section—

(1) The term "reserve account" means a separate account in an unemployment fund, with respect to an employer or group of employers, from which compensa-

tion is payable only with respect to the unemployment of individuals who were in the employ of such employer, or of one of the employers comprising the group.

(2) The term "pooled fund" means an unemployment fund or any part thereof in which all contributions are mingled and undivided, and from which compensation is payable to all eligible individuals, except that to individuals last employed by employers with respect to whom reserve accounts are maintained by the State agency, it is payable only when such accounts are exhausted.

(3) The term "guaranteed employment account" means a separate account, in an unemployment fund, of contributions paid by an employer (or group of employers) who

(A) guarantees in advance thirty hours of wages for each of forty calendar weeks (or more, with one weekly hour deducted for each added week guaranteed) in twelve months, to all the individuals in his employ in one or more distinct establishments, except that any such individual's guaranty may commence after a probationary period (included within twelve or less consecutive calendar weeks), and

(B) gives security or assurance, satisfactory to the State agency, for the fulfillment of such guaranties, from which account compensation shall be payable with respect to the unemployment of any such individual whose guaranty is not fulfilled or renewed and who is otherwise eligible for compensation under the State law.

(4) The term "year of compensation experience", as applied to an employer, means any calendar year throughout which compensation was payable with respect to any individual in his employ who became unemployed and was eligible for compensation.

---

**Provision of the Social Security Act as in Effect Prior to  
P.L. 76-36, Approved April 19, 1939 (53 Stat. 581)  
[State Unemployment Compensation—Appropriations]**

APPROPRIATION

SECTION 301. For the purpose of assisting the States in the administration of their unemployment compensation laws, there is hereby authorized to be appropriated, for the fiscal year ending June 30, 1936, the sum of \$4,000,000, and for each fiscal year thereafter the sum of \$49,000,000, to be used as hereinafter provided.

---

**Provisions of the Social Security Act as in Effect Prior to  
P.L. 76-379, Approved August 1939 (53 Stat. 1360)  
Social Security Act Amendments of 1939**

Sec. 2. (a) A State plan for old-age assistance must (1) provide that it shall be in effect in all political subdivisions of the State, and, if administered by them, be mandatory upon them; (2) provide for financial participation by the State; (3) either provide for the establishment or designation of a single State agency to administer the plan, or provide for the establishment or designation of a single State agency to supervise the administration of the plan; (4) provide for granting to any individual, whose claims for old-age assistance is denied, an opportunity for a fair hearing before such State agency; (5) provide such methods of administration (other than those relating to selection, tenure of office, and compensation of personnel) as are found by the Board to be necessary for the efficient operation of the plan; (6) provide that the State agency will make such reports, in such form and containing such information, as the Board may from time to time require, and comply with such provisions as the Board may from time to time find necessary to assure the correctness and verification of such reports; and (7) provide that, if the State or any of its political subdivisions collects from the estate of any recipient of old-age assistance any amount with respect to old-age assistance furnished him under the plan, one-half of the net amount so collected shall be promptly paid to the United States. Any payment so made shall be deposited in the Treasury to the credit of the appropriation for the purposes of this title.



## PAYMENT TO STATES

SEC. 3. (a) From the sums appropriated therefor, the Secretary of the Treasury shall pay to each State which has an approved plan for old-age assistance, for each quarter, beginning with the quarter commencing July 1, 1935, (1) an amount, which shall be used exclusively as old-age assistance, equal to one-half of the total of the sums expended during such quarter as old-age assistance under the State plan with respect to each individual who at the time of such expenditure is sixty-five years of age or older and is not an inmate of a public institution, not counting so much of such expenditure with respect to any individual for any month as exceeds \$30, and (2) 5 per centum of such amount, which shall be used for paying the costs of administering the State plan or for old-age assistance, or both, and for no other purpose: *Provided*, That the State plan, in order to be approved by the Board, need not provide for financial participation before July 1, 1937 by the State, in the case of any State which the Board, upon application by the State and after reasonable notice and opportunity for hearing to the State, finds is prevented by its constitution from providing such financial participation.

(b) The method of computing and paying such amounts shall be as follows:

(1) The Board shall, prior to the beginning of each quarter, estimate the amount to be paid to the State for such quarter under the provisions of clause (1) of subsection (a), such estimate to be based on (A) a report filed by the State containing its estimate of the total sum to be expended in such quarter in accordance with the provisions of such clause, and stating the amount appropriated or made available by the State and its political subdivisions for such expenditures in such quarter, and if such amount is less than one-half of the total sum of such estimated expenditures, the source or sources from which the difference is expected to be derived, (B) records showing the number of aged individuals in the State, and (C) such other investigation as the Board may find necessary.

(2) The Board shall then certify to the Secretary of the Treasury the amount so estimated by the Board, reduced or increased, as the case may be, by any sum by which it finds that its estimate for any prior quarter was greater or less than the amount which should have been paid to the State under clause (1) of subsection (a) for such quarter, except to the extent that such sum has been applied to make the amount certified for any prior quarter greater or less than the amount estimated by the Board for such prior quarter.

(3) The Secretary of the Treasury shall thereupon, through the Division of Disbursement of the Treasury Department and prior to audit or settlement by the General Accounting Office, pay to the State, at the time or times fixed by the Board, the amount so certified, increased by 5 per centum.

## DEFINITION

SEC. 6. When used in this title the term "old-age assistance" means money payments to aged individuals.

## TITLE II—FEDERAL OLD-AGE BENEFITS

## OLD-AGE RESERVE ACCOUNT

SECTION 201. (a) There is hereby created an account in the Treasury of the United States to be known as the "Old-Age Reserve Account" hereinafter in this title called the "Account". There is hereby authorized to be appropriated to the Account for each fiscal year, beginning with the fiscal year ending June 30, 1937, an amount sufficient, as an annual premium to provide for the payments required under this title, such amount to be determined on a reserve basis in accordance with accepted actuarial principles, and based upon such tables of mortality as the Secretary of the Treasury shall from time to time adopt, and upon an interest rate of 3 per centum per annum compounded annually. The Secretary of the Treasury shall submit annually to the Bureau of the Budget an estimate of the appropriations to be made to the Account.

(b) It shall be the duty of the Secretary of the Treasury to invest such portion of the amounts credited to the Account as is not, in his judgment, required to meet current withdrawals. Such investment may be made only in interest-bearing obligations of the United States or in obligations guaranteed as to both principal and interest by the United States. For such purpose such obligations may be acquired (1) on original issue at par, or (2) by purchase of outstanding obligations at the market price. The purposes for which obligations of the United States may be issued under the Second Liberty Bond Act, as amended, are hereby extended to authorize the issuance at par of special



obligations exclusively to the Account. Such special obligations shall bear interest at the rate of 3 per centum per annum. Obligations other than such special obligations may be acquired for the Account only on such terms as to provide an investment yield of not less than 3 per centum per annum.

(c) Any obligations acquired by the Account (except special obligations issued exclusively to the Account) may be sold at the market price, and such special obligations may be redeemed at par plus accrued interest.

(d) The interest on, and the proceeds from the sale or redemption of, any obligations held in the Account shall be credited to and form a part of the Account.

(e) All amounts credited to the Account shall be available for making payments required under this title.

(f) The Secretary of the Treasury shall include in his annual report the actuarial status of the Account.

#### OLD-AGE BENEFIT PAYMENTS

SEC. 202. (a) Every qualified individual (as defined in section 210) shall be entitled to receive, with respect to the period beginning on the date he attains the age of sixty-five, or on January 1, 1942, whichever is the later, and ending on the date of his death, an old-age benefit (payable as nearly as practicable in equal monthly installments) as follows:

(1) If the total wages (as defined in section 210) determined by the Board to have been paid to him, with respect to employment (as defined in section 210) after December 31, 1936, and before he attained the age of sixty-five, were not more than \$3,000, the old-age benefit shall be at a monthly rate of one-half of 1 per centum of such total wages;

(2) If such total wages were more than \$3,000, the old-age benefit shall be at a monthly rate equal to the sum of the following:

(A) One-half of 1 per centum of \$3,000; plus

(B) One-twelfth of 1 per centum of the amount by which such total wages exceeded \$3,000 and did not exceed \$45,000; plus

(C) One-twenty-fourth of 1 per centum of the amount by which such total wages exceeded \$45,000.

(b) In no case shall the monthly rate computed under subsection (a) exceed \$85.

(c) If the Board finds at any time that more or less than the correct amount has theretofore been paid to any individual under this section, then, under regulations made by the Board, proper adjustments shall be made in connection with subsequent payments under this section to the same individual.

(d) Whenever the Board finds that any qualified individual has received wages with respect to regular employment after he attained the age of sixty-five, the old-age benefit payable to such individual shall be reduced, for each calendar month in any part of which such regular employment occurred, by an amount equal to one month's benefit. Such reduction shall be made, under regulations prescribed by the Board, by deductions from one or more payments of old-age benefit to such individual.

#### PAYMENTS UPON DEATH

SEC. 203. (a) If any individual dies before attaining the age of sixty-five, there shall be paid to his estate an amount equal to  $3\frac{1}{2}$  per centum of the total wages determined by the Board to have been paid to him, with respect to employment after December 31, 1936.

(b) If the Board finds that the correct amount of the old-age benefit payable to a qualified individual during his life under section 202 was less than  $3\frac{1}{2}$  per centum of the total wages by which such old-age benefit was measurable, then there shall be paid to his estate a sum equal to the amount, if any, by which such  $3\frac{1}{2}$  per centum exceeds the amount (whether more or less than the correct amount) paid to him during his life as old-age benefit.

(c) If the Board finds that the total amount paid to a qualified individual under an old-age benefit during his life was less than the correct amount to which he was entitled under section 202, and that the correct amount of such old-age benefit was  $3\frac{1}{2}$  per centum or more of the total wages by which such old-age benefit was measurable, then there shall be paid to his estate a sum equal to the amount, if any, by which the correct amount of the old-age benefit exceeds the amount which was so paid to him during his life.

#### PAYMENTS TO AGED INDIVIDUALS NOT QUALIFIED FOR BENEFITS

SEC. 204. (a) There shall be paid in a lump sum to any individual who, upon attaining the age of sixty-five, is not a qualified individual, an amount equal to  $3\frac{1}{2}$  per

## SUPERSEDED PROVISIONS—SOCIAL SECURITY ACT

centum of the total wages determined by the Board to have been paid to him, with respect to employment after December 31, 1936, and before he attained the age of sixty-five.

(b) After any individual becomes entitled to any payment under subsection (a), no other payment shall be made under this title in any manner measured by wages paid to him, except that any part of any payment under subsection (a) which is not paid to him before his death shall be paid to his estate.

## AMOUNTS OF \$500 OR LESS PAYABLE TO ESTATES

SEC. 205. If any amount payable to an estate under section 203 or 204 is \$500 or less, such amount may, under regulations prescribed by the Board, be paid to the persons found by the Board to be entitled thereto under the law of the State in which the deceased was domiciled, without the necessity of compliance with the requirements of law with respect to the administration of such estate.

## OVERPAYMENTS DURING LIFE

SEC. 206. If the Board finds that the total amount paid to a qualified individual under an old-age benefit during his life was more than the correct amount to which he was entitled under section 202, and was  $3\frac{1}{2}$  per centum or more of the total wages by which such old-age benefit was measurable, then upon his death there shall be repaid to the United States by his estate the amount, if any, by which such total amount paid to him during his life exceeds whichever of the following is the greater: (1) Such  $3\frac{1}{2}$  per centum, or (2) the correct amount to which he was entitled under section 202.

## METHOD OF MAKING PAYMENTS

SEC. 207. The Board shall from time to time certify to the Secretary of the Treasury the name and address of each person entitled to receive a payment under this title, the amount of such payment, and the time at which it should be made, and the Secretary of the Treasury through the Division of Disbursement of the Treasury Department, and prior to audit or settlement by the General Accounting Office, shall make payment in accordance with the certification by the Board.

## ASSIGNMENT

SEC. 208. The right of any person to any future payment under this title shall not be transferable or assignable, at law or in equity, and none of the moneys paid or payable or rights existing under this title shall be subject to execution, levy, attachment, garnishment, or other legal process, or to the operation of any bankruptcy or insolvency law.

## PENALTIES

SEC. 209. Whoever in any application for any payment under this title makes any false statement as to any material fact, knowing such statement to be false, shall be fined not more than \$1,000 or imprisoned for not more than one year, or both.

## DEFINITIONS

SEC. 210. When used in this title—

(a) The term "wages" means all remuneration for employment, including the cash value of all remuneration paid in any medium other than cash; except that such term shall not include that part of the remuneration which, after remuneration equal to \$3,000 has been paid to an individual by an employer with respect to employment during any calendar year, is paid to such individual by such employer with respect to employment during such calendar year.

(b) The term "employment" means any service, of whatever nature, performed within the United States by an employee for his employer, except—

- (1) Agricultural labor;
- (2) Domestic service in a private home;
- (3) Casual labor not in the course of the employer's trade or business;
- (4) Service performed as an officer or member of the crew of a vessel documented under the laws of the United States or of any foreign country;
- (5) Service performed in the employ of the United States Government or of an instrumentality of the United States;
- (6) Service performed in the employ of a State, a political subdivision thereof, or an instrumentality of one or more States or political subdivisions;



(7) Service performed in the employ of a corporation, community chest, fund, or foundation, organized and operated exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals, no part of the net earnings of which inures to the benefit of any private shareholder or individual.

(c) The term "qualified individual" means any individual with respect to whom it appears to the satisfaction of the Board that—

(1) He is at least sixty-five years of age; and

(2) The total amount of wages paid to him, with respect to employment after December 31, 1936, and before he attained the age of sixty-five, was not less than \$2,000; and

(3) Wages were paid to him, with respect to employment on some five days after December 31, 1936, and before he attained the age of sixty-five, each day being in a different calendar year.

SEC. 302. (a) The Board shall from time to time certify to the Secretary of the Treasury for payment to each State which has an unemployment compensation law approved by the Board under Title IX, such amounts as the Board determines to be necessary for the proper administration of such law during the fiscal year in which such payment is to be made. The Board's determination shall be based on (1) the population of the State; (2) an estimate of the number of persons covered by the State law and of the cost of proper administration of such law; and (3) such other factors as the Board finds relevant. The Board shall not certify for payment under this section in any fiscal year a total amount in excess of the amount appropriated therefor for such fiscal year.

SEC. 303. (a) The Board shall make no certification for payment to any State unless it finds that the law of such State, approved by the Board under Title IX, includes provisions for—

(1) Such methods of administration (other than those relating to selection, tenure of office, and compensation of personnel) as are found by the Board to be reasonably calculated to insure full payment of unemployment compensation when due; and

(2) Payment of unemployment compensation solely through public employment offices in the State or such other agencies as the Board may approve; and

(3) Opportunity for a fair hearing, before an impartial tribunal, for all individuals whose claims for unemployment compensation are denied; and

(4) The payment of all money received in the unemployment fund of such State, immediately upon such receipt, to the Secretary of the Treasury to the credit of the Unemployment Trust Fund established by section 904; and

(5) Expenditure of all money requisitioned by the State agency from the Unemployment Trust Fund, in the payment of unemployment compensation, exclusive of expenses of administration; and

(6) The making of such reports, in such form and containing such information, as the Board may from time to time require, and compliance with such provisions as the Board may from time to time find necessary to assure the correctness and verification of such reports; and

(7) Making available upon request to any agency of the United States charged with the administration of public works or assistance through public employment, the name, address, ordinary occupation and employment status of each recipient of unemployment compensation, and a statement of such recipient's rights to further compensation under such law.

SEC. 402. (a) (5) provide such methods of administration (other than those relating to selection, tenure of office, and compensation of personnel) as are found by the Board to be necessary for the efficient operation of the plan; and

SEC. 403.

(b)

(2) The Board shall then certify to the Secretary of the Treasury the amount so estimated by the Board, reduced or increased, as the case may be, by any sum by which it finds that its estimate for any prior quarter was greater or less than the amount which should have been paid to the State for such quarter, except to the extent that such sum has been applied to make the amount certified for any prior quarter greater or less than the amount estimated by the Board for such prior quarter.

SEC. 406.

(a) The term "dependent child" means a child under the age of sixteen who has been deprived of parental support or care by reason of the death, continued absence from the home, or physical or mental incapacity of a parent, and who is living with his father, mother, grandfather, grandmother, brother, sister, stepfather, stepmother, stepbrother, stepsister, uncle, or aunt, in a place of residence maintained by one or



more of such relatives as his or their own home;

SEC. 503. (a) (3) provide such methods of administration (other than those relating to selection, tenure of office, and compensation of personnel) as are necessary for the efficient operation of the plan;

SEC. 513. (a) (3) provide such methods of administration (other than those relating to selection, tenure of office, and compensation of personnel) as are necessary for the efficient operation of the plan;

#### APPROPRIATION

SECTION 601. For the purpose of assisting States, counties, health districts, and other political subdivisions of the States in establishing and maintaining adequate public-health services, including the training of personnel for State and local health work, there is hereby authorized to be appropriated for each fiscal year, beginning with the fiscal year ending June 30, 1936, the sum of \$8,000,000 to be used as hereinafter provided.

SEC. 1002. (a) (5) provide such methods of administration (other than those relating to selection, tenure of office, and compensation of personnel) as are found by the Board to be necessary for the efficient operation of the plan;

#### PAYMENT TO STATES

SEC. 1003. (a) From the sums appropriated therefor, the Secretary of the Treasury shall pay to each State which has an approved plan for aid to the blind, for each quarter, beginning with the quarter commencing July 1, 1935, (1) an amount, which shall be used exclusively as aid to the blind, equal to one-half of the total of the sums expended during such quarter as aid to the blind under the State plan with respect to each individual who is blind and is not an inmate of a public institution, not counting so much of such expenditure with respect to any individual for any month as exceeds \$30, and (2) 5 per centum of such amount, which shall be used for paying the costs of administering the State plan or for aid to the blind, or both, and for no other purpose.

(b) The method of computing and paying such amounts shall be as follows:

(1) The Board shall, prior to the beginning of each quarter, estimate the amount to be paid to the State for such quarter under the provisions of clause (1) of subsection (a), such estimate to be based on (A) a report filed by the State containing its estimate of the total sum to be expended in such quarter in accordance with the provisions of such clause, and stating the amount appropriated or made available by the State and its political subdivisions for such expenditures in such quarter, and if such amount is less than one-half of the total sum of such estimated expenditures, the source or sources from which the difference is expected to be derived, (B) records showing the number of blind individuals in the State, and (C) such other investigation as the Board may find necessary.

(2) The Board shall then certify to the Secretary of the Treasury the amount so estimated by the Board, reduced or increased, as the case may be, by any sum by which it finds that its estimate for any prior quarter was greater or less than the amount which should have been paid to the State under clause (1) of subsection (a) for such quarter, except to the extent that such sum has been applied to make the amount certified for any prior quarter greater or less than the amount estimated by the Board for such prior quarter.

(3) The Secretary of the Treasury shall thereupon, through the Division of Disbursement of the Treasury Department and prior to audit or settlement by the General Accounting Office, pay to the State, at the time or times fixed by the Board, the amount so certified, increased by 5 per centum.

#### DEFINITION

SEC. 1006. used in this title the term "aid to the blind" means money payments to blind individuals.

SEC. 1101. (a)

(1) The term "State" (except when used in section 531) includes Alaska, Hawaii, and the District of Columbia.

**Provisions of the Social Security Act as in Effect Prior to  
P.L. 78-410, Approved July 1, 1944 (58 Stat. 682)  
Public Health Service Act**

## **TITLE VI—PUBLIC HEALTH WORK**

SEC. 601. For the purpose of assisting States, counties, health districts, and other political subdivisions of the States in establishing and maintaining adequate public health services, including the training of personnel for State and local health work, there is hereby authorized to be appropriated for each fiscal year, beginning with the fiscal year ending June 30, 1940, the sum of \$11,000,000 to be used as hereinafter provided.

### **STATE AND LOCAL PUBLIC HEALTH SERVICES**

SEC. 602. (a) The Surgeon General of the Public Health Service, with the approval of the Secretary of the Treasury, shall, at the beginning of each fiscal year, allot to the States the total of (1) the amount appropriated for such year pursuant to section 601; and (2) the amounts of the allotments under this section for the preceding fiscal year remaining unpaid to the States at the end of such fiscal year. The amounts of such allotments shall be determined on the basis of (1) the population; (2) the special health problems; and (3) the financial needs; of the respective States. Upon making such allotments the Surgeon General of the Public Health Service shall certify the amounts thereof to the Secretary of the Treasury.

(b) The amount of an allotment to any State under subsection (a) for any fiscal year, remaining unpaid at the end of such fiscal year, shall be available for allotment to States under subsection (a) for the succeeding fiscal year, in addition to the amount appropriated for such year.

(c) Prior to the beginning of each quarter of the fiscal year, the Surgeon General of the Public Health Service shall, with the approval of the Secretary of the Treasury, determine in accordance with rules and regulations previously prescribed by such Surgeon General after consultation with a conference of the State and Territorial health authorities, the amount to be paid to each State for such quarter from the allotment to such State, and shall certify the amount so determined to the Secretary of the Treasury. Upon receipt of such certification, the Secretary of the Treasury shall, through the Division of Disbursement of the Treasury Department and prior to audit or settlement by the General Accounting Office, pay in accordance with such certification.

(d) The moneys so paid to any State shall be expended solely in carrying out the purposes specified in section 601, and in accordance with plans presented by the health authority of such State and approved by the Surgeon General of the Public Health Service.

### **INVESTIGATIONS**

SEC. 603. (a) There is hereby authorized to be appropriated for each fiscal year, beginning with the fiscal year ending June 30, 1936, the sum of \$2,000,000 for expenditure by the Public Health Service for investigation of disease and problems of sanitation (including the printing and binding of the findings of such investigations), and for the pay and allowances and traveling expenses of personnel of the Public Health Service, including commissioned officers, engaged in such investigations or detailed to cooperate with the health authorities of any State in carrying out the purposes specified in section 601: *Provided*, That no personnel of the Public Health Service shall be detailed to cooperate with the health authorities of any State except at the request of the proper authorities of such State.

(b) The personnel of the Public Health Service paid from any appropriation not made pursuant to subsection (a) may be detailed to assist in carrying out the purposes of this title. The appropriation from which they are paid shall be reimbursed from the appropriation made pursuant to subsection (a) to the extent of their salaries and allowances for services performed while so detailed.

(c) The Secretary of the Treasury shall include in his annual report to Congress a full account of the administration of this title.



**Provisions of the Social Security Act as in Effect Prior to  
P.L. 79-719, Approved August 10, 1946 (60 Stat. 978)  
Social Security Act Amendments of 1946**

SEC. 3. (a) From the sums appropriated therefor, the Secretary of the Treasury shall pay to each State which has an approved plan for old-age assistance, for each quarter, beginning with the quarter commencing January 1, 1940, (1) an amount, which shall be used exclusively as old-age assistance, equal to one-half of the total of the sums expended during such quarter as old-age assistance under the State plan with respect to each needy individual who at the time of such expenditure is sixty-five years of age or older and is not an inmate of a public institution, not counting so much of such expenditure with respect to any individual for any month as exceeds \$40, and (2) 5 per centum of such amount, which shall be used for paying the costs of administering the State plan or for old-age assistance, or both, and for no other purpose.

SEC. 202.

(c)

(3)

(C) such child, at the time of such individual's death, was living with and supported by such child's stepfather.

**Lump-Sum Death Payments**

(g) Upon the death, after December 31, 1939, of an individual who died a fully or currently insured individual leaving no surviving widow, child, or parent who would, on filing application in the month in which such individual died, be entitled to a benefit for such month under subsection (c), (d), (e), or (f) of this section, an amount equal to six times a primary insurance benefit of such individual shall be paid in a lump-sum to the following person (or if more than one, shall be distributed among them) whose relationship to the deceased is determined by the Board, and who is living on the date of such determination: To the widow or widower of the deceased; or, if no such widow or widower be then living, to any child or children of the deceased and to any other person or persons who are, under the intestacy law of the State where the deceased was domiciled, entitled to share as distributees with such children of the deceased, in such proportions as is provided by such law; or, if no widow or widower and no such child and no such other person be then living, to the parent or to the parents of the deceased, in equal shares. A person who is entitled to share as distributee with an above-named relative of the deceased shall not be precluded from receiving a payment under this subsection by reason of the fact that no such named relative survived the deceased or of the fact that no such named relative of the deceased was living on the date of such determination. If none of the persons described in this subsection be living on the date of such determination, such amount shall be paid to any person or persons, equitably entitled thereto, to the extent and in the proportions that he or they shall have paid the expenses of burial of the deceased. No payment shall be made to any person under this subsection, unless application therefor shall have been filed, by or on behalf of any such person (whether or not legally competent), prior to the expiration of two years after the date of death of such individual.

**APPLICATION**

(h) An individual who would have been entitled to a benefit under subsection (b), (c), (d), (e), or (f) for any month had he filed application therefor prior to the end of such month, shall be entitled to such benefit for such month if he files application therefor prior to the end of the third month immediately succeeding such month.

SEC. 203.

(d)

(2) if a child under eighteen and over sixteen years of age, failed to attend school regularly and the Board finds that attendance was feasible; or

SEC. 209.

(a) The term "wages" means all remuneration for employment, including the cash value of all remuneration paid in any medium other than cash; except that such term shall not include—

(1) That part of the remuneration which, after remuneration equal to \$3,000 has been paid to an individual by an employer with respect to employment during any calendar year prior to 1940, is paid to such individual by such employer with respect to employment during such calendar year;

(2) That part of the remuneration which, after remuneration equal to \$3,000 has been paid to an individual with respect to employment during any calendar year after 1939, is paid to such individual with respect to employment during such calendar year;

(h) The term "currently insured individual" means any individual with respect to whom it appears to the satisfaction of the Board that he has been paid wages of not less than \$50 for each of not less than six of the twelve calendar quarters, immediately preceding the quarter in which he died.

(i) The term "wife" means the wife of an individual who either (1) is the mother of such individual's son or daughter, or (2) was married to him prior to January 1, 1939, or if later, prior to the date upon which he attained the age of sixty.

(k) The term "child" (except when used in section 202(g)) means the child of an individual, and the stepchild of an individual by a marriage contracted prior to the date upon which he attained the age of sixty and prior to the beginning of the twelfth month before the month in which he died, and a child legally adopted by an individual prior to the date upon which he attained the age of sixty and prior to the beginning of the twelfth month before the month in which he died.

SEC. 403. (a) From the sums appropriated therefor, the Secretary of the Treasury shall pay to each State which has an approved plan for aid to dependent children, for each quarter, beginning with the quarter commencing July 1, 1935, an amount, which shall be used exclusively for carrying out the State plan, equal to one-half of the total of the sums expended during such quarter under such plan, not counting so much of such expenditure with respect to any dependent child for any month as exceeds \$18, or if there is more than one dependent child in the same home, as exceeds \$18 for any month with respect to one such dependent child and \$12 for such month with respect to each of the other dependent children.

SEC. 502. (a) Out of the sums appropriated pursuant to section 501 for each fiscal year the Secretary of Labor shall allot to each State \$20,000, and such part of \$2,800,000 as he finds that the number of live births in such State bore to the total number of live births in the United States, in the latest calendar year for which the Bureau of the Census has available statistics.

SEC. 512. (a) Out of the sums appropriated pursuant to section 511 for each fiscal year the Secretary of Labor shall allot to each State \$20,000, and \$1,830,000 to the States according to the need of each State as determined by him after taking into consideration the number of crippled children in such State in need of the services referred to in section 511 and the cost of furnishing such services to them.

SEC. 541. (a) There is hereby authorized to be appropriated for the fiscal year ending June 30, 1936, the sum of \$425,000, for all necessary expenses of the Children's Bureau in administering the provisions of this title, except section 531.

SEC. 1003. (a) From the sums appropriated therefor, the Secretary of the Treasury shall pay to each State which has an approved plan for aid to the blind, for each quarter, beginning with the quarter commencing January 1, 1940, (1) an amount, which shall be used exclusively as aid to the blind, equal to one-half of the total of the sums expended during such quarter as aid to the blind under the State plan with respect to each needy individual who is blind and is not an inmate of a public institution, not counting so much of such expenditure with respect to any individual for any month as exceeds \$40, and (2) an amount equal to one-half of the total of the sums expended during such quarter as found necessary by the Board for the proper and efficient administration of the State plan, which amount shall be used for paying the costs of administering the State plan or for aid to the blind, or both, and for no other purpose.

SEC. 1101. (a)

(1) The term "State" (except when used in section 531) includes Alaska, Hawaii, and the District of Columbia, and when used in titles V and VI of such Act (including section 531) includes Puerto Rico.

---

**Provision of the Social Security Act as in Effect Prior to  
P.L. 80-379, Approved August 6, 1947 (61 Stat. 793)  
Social Security Act Amendments of 1947**

SEC. 904.

(h) There is hereby established in the Unemployment Trust Fund a Federal unemployment account. There is hereby authorized to be appropriated to such Federal



unemployment account a sum equal to the excess of taxes collected prior to July 1, 1943, under title IX of this Act and under the Federal Unemployment Tax Act, over the total unemployment administrative expenditures made prior to July 1, 1943; and there is hereby authorized to be appropriated to such account for the fiscal year 1945 and for each fiscal year thereafter (1) a sum equal to any excess of taxes collected in the preceding fiscal year under the Federal Unemployment Tax Act over the unemployment administrative expenditures made in such year, and (2) such further sums, if any, as may be necessary to carry out the purposes of title XII. Any amounts in the Federal unemployment account on October 1, 1947, and any amounts repaid to such account after such date, shall be covered into the general fund of the Treasury. As used in this subsection, the term "unemployment administrative expenditures" means expenditures for grants under title III of this Act, for the administration of that title by the Board, and for the administration of title IX of this Act and of the Federal Unemployment Tax Act by the Department of the Treasury and the Board. For the purposes of this subsection there shall be deducted from the total amount of taxes collected prior to July 1, 1943, under title IX of this Act, the sum of \$40,561,886.43 which was authorized to be appropriated by the Act of August 24, 1937 (50 Stat. 754).

---

**Provision of the Social Security Act as in Effect Prior to  
P.L. 80-492, Enacted April 20, 1948 (62 Stat. 195)  
[Social Security Act Amendments—April 1948]**

**SEC. 209.**

(b)

(15) Service performed by an individual under the age of eighteen in the delivery or distribution of newspapers or shopping news, not including delivery or distribution to any point for subsequent delivery or distribution; or

---

**Provisions of the Social Security Act As in Effect Prior to  
P.L. 80-642, Enacted June 14, 1948 (62 Stat. 438)  
[Employment Taxes—Social Security Benefits]**

**SEC. 3. (a)** From the sums appropriated therefor, the Secretary of the Treasury shall pay to each State which has an approved plan for old-age assistance, for each quarter, beginning with the quarter commencing October 1, 1946, (1) an amount, which shall be used exclusively as old-age assistance, equal to the sum of the following proportions of the total amounts expended during such quarter as old-age assistance under the State plan with respect to each needy individual who at the time of such expenditure is sixty-five years of age or older and is not an inmate of a public institution, not counting so much of such expenditure with respect to any such individual for any month as exceeds \$45—

(A) Two-thirds of such expenditures, not counting so much of any expenditure with respect to any month as exceeds the product of \$15 multiplied by the total number of such individuals who received old-age assistance for such month, plus

(B) One-half of the amount by which such expenditures exceed the maximum which may be counted under clause (A);

and (2) an amount equal to one-half of the total of the sums expended during such quarter as found necessary by the Administrator for the proper and efficient administration of the State plan, which amount shall be used for paying the costs of administering the State plan or for old-age assistance, or both, and for no other purpose.

**SEC. 403. (a)** From the sums appropriated therefor, the Secretary of the Treasury shall pay to each State which has an approved plan for aid to dependent children, for each quarter, beginning with the quarter commencing October 1, 1946, (1) an amount, which shall be used exclusively as aid to dependent children, equal to the sum of the following proportions of the total amounts expended during such quarter as aid to dependent children under the State plan, not counting so much of such expenditure with respect to any dependent child for any month as exceeds \$24, or if there is more than one dependent child in the same home, as exceeds \$24 with respect to one such dependent child and \$15 with respect to each of the other dependent children—

(A) Two-thirds of such expenditures, not counting so much of any expenditure with respect to any month as exceeds the product of \$9 multiplied by the total

number of dependent children with respect to whom aid to dependent children is paid for such month, plus

(B) One-half of the amount by which such expenditures exceed the maximum which may be counted under clause (A);

and (2) an amount equal to one-half of the total of the sums expended during such quarter as found necessary by the Administrator for the proper and efficient administration of the State plan, which amount shall be used for paying the costs of administering the State plan or for aid to dependent children, or both, and for no other purpose.

SEC. 1003. (a) From the sums appropriated therefor, the Secretary of the Treasury shall pay to each State which has an approved plan for aid to the blind, for each quarter, beginning with the quarter commencing October 1, 1946, (1) an amount, which shall be used exclusively as aid to the blind, equal to the sum of the following proportions of the total amounts expended during such quarter as aid to the blind under the State plan with respect to each needy individual who is blind and is not an inmate of a public institution, not counting so much of such expenditure with respect to any such individual for any month as exceeds \$45—

(A) Two-thirds of such expenditures, not counting so much of any expenditure with respect to any month as exceeds the product of \$15 multiplied by the total number of such individuals who received aid to the blind for such month, plus

(B) One-half of the amount by which such expenditures exceed the maximum which may be counted under clause (A);

and (2) an amount equal to one-half of the total of the sums expended during such quarter as found necessary by the Administrator for the proper and efficient administration of the State plan, which amount shall be used for paying the costs of administering the State plan or for aid to the blind, or both, and for no other purpose.

#### Provisions of the Social Security Act as in Effect Prior to

P.L. 81-174, Approved July 16, 1949 (63 Stat. 445)

[Social Security Act—§1302 Extension]

#### SEC. 1302.

(c) The term "Federal maritime service" means service determined to be employment pursuant to section 209(o).

(d) The term "Federal maritime wages" means remuneration determined pursuant to section 209(o) to be remuneration for service referred to in section 209(o)(1).

#### Provisions of the Social Security Act as in Effect Prior to

P.L. 81-734, Approved August 28, 1950 (64 Stat. 477)

Social Security Act Amendments of 1950

SEC. 2. (a) (4) provide for granting to any individual, whose claim for old-age assistance is denied, an opportunity for a fair hearing before such State agency;

#### SEC. 3.

(a) From the sums appropriated therefor, the Secretary of the Treasury shall pay to each State which has an approved plan for old-age assistance, for each quarter, beginning with the quarter commencing October 1, 1948, (1) an amount, which shall be used exclusively as old-age assistance, equal to the sum of the following proportions of the total amounts expended during such quarter as old-age assistance under the State plan with respect to each needy individual who at the time of such expenditure is sixty-five years of age or older and is not an inmate of a public institution, not counting so much of such expenditure with respect to any such individual for any month as exceeds \$50—

(A) three-fourths of such expenditures, not counting so much of any expenditure with respect to any month as exceeds the product of \$20 multiplied by the total number of such individuals who received old-age assistance for such month, plus

(B) one-half of the amount by which such expenditures exceed the maximum which may be counted under clause (A);

and (2) an amount equal to one-half of the total of the sums expended during such quarter as found necessary by the Administrator for the proper and efficient administration of the State plan, which amount shall be used for paying the costs of administering the State plan or for old-age assistance, or both, and for no other purpose.



SEC. 6. When used in this title the term "old-age assistance" means money payments to needy aged individuals.

#### SEC. 201.

(f) The Managing Trustee is directed to pay from the Trust Fund into the Treasury the amount estimated by him and the Chairman of the Social Security Board which will be expended during a three month period by the Social Security Board and the Treasury Department for the administration of Title II and Title VIII of this Act, and the Federal Insurance Contributions Act. Such payments shall be covered into the Treasury as repayments to the account for reimbursement of expenses incurred in connection with the administration of Titles II and VIII of this Act and the Federal Insurance Contributions Act. Such repayments shall not be available for expenditures but shall be carried to the surplus fund of the Treasury. If it subsequently appear<sup>1</sup> that the estimates in any particular three month period were too high or too low, appropriate adjustments shall be made by the Managing Trustee in future payments.

### OLD-AGE AND SURVIVORS INSURANCE BENEFIT PAYMENTS

#### Primary Insurance Benefits

SEC. 202. (a) Every individual, who (1) is a fully insured individual (as defined in section 209(g)) after December 31, 1939, (2) has attained the age of sixty-five, and (3) has filed application for primary insurance benefits, shall be entitled to receive a primary insurance benefit (as defined in section 209(e)) for each month, beginning with the month in which such individual becomes so entitled to such insurance benefits and ending with the month preceding the month in which he dies.

#### Wife's Insurance Benefits

(b)(1) Every wife (as defined in section 209(i)) of an individual entitled to primary insurance benefits, if such wife (A) has attained the age of sixty-five, (B) has filed application for wife's insurance benefits, (C) was living with such individual at the time such application was filed, and (D) is not entitled to receive primary insurance benefits, or is entitled to receive primary insurance benefits each of which is less than one-half of a primary insurance benefit of her husband, shall be entitled to receive a wife's insurance benefit for each month, beginning with the month in which she becomes so entitled to such insurance benefits, and ending with the month immediately preceding the first month in which any of the following occurs: she dies, her husband dies, they are divorced a vinculo matrimonii, or she becomes entitled to receive a primary insurance benefit equal to or exceeding one-half of a primary insurance benefit of her husband.

(2) Such wife's insurance benefit for each month shall be equal to one-half of a primary insurance benefit of her husband, except that, if she is entitled to receive a primary insurance benefit for any month, such wife's insurance benefit for such month shall be reduced by an amount equal to a primary insurance benefit of such wife.

#### Child's Insurance Benefits

(c)(1) Every child (as defined in section 209(k)) of an individual entitled to primary insurance benefits, or of an individual who died a fully or currently insured individual (as defined in section 209(g) and (h)) after December 31, 1939, if such child (A) has filed application for child's insurance benefits, (B) at the time such application was filed was unmarried and had not attained the age of 18, and (C) was dependent upon such individual at the time such application was filed, or, if such individual has died, was dependent upon such individual at the time of such individual's death, shall be entitled to receive a child's insurance benefit for each month, beginning with the month in which such child becomes so entitled to such insurance benefits, and ending with the month immediately preceding the first month in which any of the following occurs: such child dies, marries, is adopted (except for adoption by a stepparent, grandparent, aunt, or uncle subsequent to the death of such fully or currently insured individual), or attains the age of eighteen.

(2) Such child's insurance benefit for each month shall be equal to one-half of a primary insurance benefit of the individual with respect to whose wages the child is entitled to receive such benefit, except that, when there is more than one such individual such benefit shall be equal to one-half of whichever primary insurance benefit is greatest.

<sup>1</sup>As in original. Should be "appears".



(3) A child shall be deemed dependent upon a father or adopting father, or to have been dependent upon such individual at the time of the death of such individual, unless, at the time of such death, or, if such individual was living, at the time such child's application for child's insurance benefits was filed, such individual was not living with or contributing to the support of such child and—

(A) such child is neither the legitimate nor adopted child of such individual, or

(B) such child had been adopted by some other individual, or

(C) such child was living with and was chiefly supported by such child's stepfather.

(4) A child shall be deemed dependent upon a mother, adopting mother, or stepparent, or to have been dependent upon such individual at the time of the death of such individual, only if, at the time of such death, or, if such individual was living, at the time such child's application for child's insurance benefits was filed, no parent other than such individual was contributing to the support of such child and such child was not living with its father or adopting father.

#### Widow's Insurance Benefits

(d)(1) Every widow (as defined in section 209(j)) of an individual who died a fully insured individual after December 31, 1939, if such widow (A) has not remarried, (B) has attained the age of sixty-five, (C) has filed application for widow's insurance benefits, (D) was living with such individual at the time of his death, and (E) is not entitled to receive primary insurance benefits, or is entitled to receive primary insurance benefits each of which is less than three-fourths of a primary insurance benefit of her husband, shall be entitled to receive a widow's insurance benefit for each month, beginning with the month in which she becomes so entitled to such insurance benefits and ending with the month immediately preceding the first month in which any of the following occurs: she remarries, dies, or becomes entitled to receive a primary insurance benefit equal to or exceeding three-fourths of a primary insurance benefit of her husband.

(2) Such widow's insurance benefit for each month shall be equal to three-fourths of a primary insurance benefit of her deceased husband, except that, if she is entitled to receive a primary insurance benefit for any month, such widow's insurance benefit for such month shall be reduced by an amount equal to a primary insurance benefit of such widow.

#### Widow's Current Insurance Benefits

(e)(1) Every widow (as defined in section 209(j)) of an individual who died a fully or currently insured individual after December 31, 1939, if such widow (A) has not remarried, (B) is not entitled to receive a widow's insurance benefit, and is not entitled to receive primary insurance benefits, or is entitled to receive primary insurance benefits each of which is less than three-fourths of a primary insurance benefit of her husband, (C) was living with such individual at the time of his death, (D) has filed application for widow's current insurance benefits, and (E) at the time of filing such application has in her care a child of such deceased individual entitled to receive a child's insurance benefit, shall be entitled to receive a widow's current insurance benefit for each month, beginning with the month in which she becomes so entitled to such current insurance benefits and ending with the month immediately preceding the first month in which any of the following occurs: no child of such deceased individual is entitled to receive a child's insurance benefit, she becomes entitled to receive a primary insurance benefit equal to or exceeding three-fourths of a primary insurance benefit of her deceased husband, she becomes entitled to receive a widow's insurance benefit, she remarries, she dies.

(2) Such widow's current insurance benefit for each month shall be equal to three-fourths of a primary insurance benefit of her deceased husband, except that, if she is entitled to receive a primary insurance benefit for any month, such widow's current insurance benefit for such month shall be reduced by an amount equal to a primary insurance benefit of such widow.

#### Parent's Insurance Benefit

(f)(1) Every parent (as defined in this subsection) of an individual who died a fully insured individual after December 31, 1939, if such individual did not leave a widow who meets the conditions in subsection (d)(1) (D) and (E) or an unmarried child under the age of eighteen deemed dependent on such individual under subsection (c)(3) or (4), and if such parent (A) has attained the age of sixty-five, (B) was chiefly dependent upon and supported by such individual at the time of such individual's death and filed proof of such dependency and support within two years of such date of death, (C) has

## SUPERSEDED PROVISIONS—SOCIAL SECURITY ACT

not married since such individual's death, (D) is not entitled to receive any other insurance benefits under this section, or is entitled to receive one or more of such benefits for a month, but the total for such month is less than one-half of a primary insurance benefit of such deceased individual, and (E) has filed application for parent's insurance benefits, shall be entitled to receive a parent's insurance benefit for each month, beginning with the month in which such parent becomes so entitled to such parent's insurance benefits and ending with the month immediately preceding the first month in which any of the following occurs: such parent dies, marries, or becomes entitled to receive for any month an insurance benefit or benefits (other than a benefit under this subsection) in a total amount equal to or exceeding one-half of a primary insurance benefit of such deceased individual.

(2) Such parent's insurance benefit for each month shall be equal to one-half of a primary insurance benefit of such deceased individual, except that, if such parent is entitled to receive an insurance benefit or benefits for any month (other than a benefit under this subsection), such parent's insurance benefit for such month shall be reduced by an amount equal to the total of such other benefit or benefits for such month. When there is more than one such individual with respect to whose wages the parent is entitled to receive a parent's insurance benefit for a month, such benefit shall be equal to one-half of whichever primary insurance benefit is greatest.

(3) As used in this subsection, the term "parent" means the mother or father of an individual, a stepparent of an individual by a marriage contracted before such individual attained the age of sixteen, or an adopting parent by whom an individual was adopted before he attained the age of sixteen.

## LUMP-SUM DEATH PAYMENTS

(g) Upon the death, after December 31, 1939, of an individual who died a fully or currently insured individual leaving no surviving widow, child, or parent who would, on filing application in the month in which such individual died, be entitled to a benefit for such month under subsection (c), (d), (e), or (f) of this section, an amount equal to six times a primary insurance benefit of such individual shall be paid in a lump sum to the person, if any, determined by the Administrator to be the widow or widower of the deceased and to have been living with the deceased at the time of death. If there is no such person, or if such person dies before receiving payment, then such amount shall be paid to any person or persons, equitably entitled thereto, to the extent and in the proportions that he or they shall have paid the expenses of burial of such insured individual. No payment shall be made to any person under this subsection, unless application therefor shall have been filed, by or on behalf of any such person (whether or not legally competent), prior to the expiration of two years after the date of death of such insured individual.

(h) An individual who would have been entitled to a benefit under subsection (a), (b), (c), (d), (e), or (f) for any month had he filed application therefor prior to the end of such month, shall be entitled to such benefit for such month if he files application therefor prior to the end of the third month immediately succeeding such month. Any benefit for a month prior to the month in which application is filed shall be reduced, to any extent that may be necessary, so that it will not render erroneous any benefit which, before the filing of such application, the Administrator has certified for payment for such prior month.

## REDUCTION AND INCREASE OF INSURANCE BENEFITS

SEC. 203. (a) Whenever the total of benefits under section 202, payable for a month with respect to an individual's wages, is more than \$20 and exceeds (1) \$85, or (2) an amount equal to twice a primary insurance benefit of such individual, or (3) an amount equal to 80 per centum of his average monthly wage (as defined in section 209(f)), whichever of such three amounts is least, such total of benefits shall, prior to any deductions under subsections (d), (e), or (h), be reduced to such least amount or to \$20, whichever is greater.

(b) Whenever the benefit or total of benefits under section 202, payable for a month with respect to an individual's wages, is less than \$10, such benefit or total of benefits shall, prior to any deductions under subsections (d), (e), or (h), be increased to \$10.

(c) Whenever a decrease or increase of the total of benefits for a month is made under subsection (a) or (b) of this section, each benefit, except the primary benefit, shall be proportionately decreased or increased, as the case may be.

(d) Deductions, in such amounts and at such time or times as the Board shall determine, shall be made from any payment or payments under this title to which an individual is entitled, until the total of such deductions equals such individual's benefit or benefits for any month in which such individual:

(1) rendered services for wages of not less than \$15; or



**[(2) Repealed.]**

(3) if a widow entitled to a widow's current insurance benefit, did not have in her care a child of her deceased husband entitled to receive a child's insurance benefit.

(e) Deductions shall be made from any wife's or child's insurance benefit to which a wife or child is entitled, until the total of such deductions equals such wife's or child's insurance benefit or benefits for any month in which the individual, with respect to whose wages such benefit was payable, rendered services for wages of not less than \$15.

(f) If more than one event occurs in any one month which would occasion deductions equal to a benefit for such month, only an amount equal to such benefit shall be deducted.

(g) Any individual in receipt of benefits subject to deduction under subsection (d) or (e) (or who is in receipt of such benefits on behalf of another individual), because of the occurrence of an event enumerated therein, shall report such occurrence to the Board prior to the receipt and acceptance of an insurance benefit for the second month following the month in which such event occurred. Any such individual having knowledge thereof, who fails to report any such occurrence, shall suffer an additional deduction equal to that imposed under subsection (d) or (e) except that the first additional deduction imposed by this subsection in the case of any individual shall not exceed an amount equal to one month's benefit even though the failure to report is with respect to more than one month.

(h) Deductions shall also be made from any primary insurance benefit to which an individual is entitled, or from any other insurance benefit payable with respect to such individual's wages, until such deductions total the amount of any lump sum paid to such individual under section 204 of the Social Security Act in force prior to the date of enactment of the Social Security Act Amendments of 1939.

**SEC. 205.**

(c)(1) On the basis of information obtained by or submitted to the Board, and after such verification thereof as it deems necessary, the Board shall establish and maintain records of the amounts of wages paid to each individual and of the periods in which such wages were paid and, upon request, shall inform any individual, or after his death shall inform the wife, child, or parent of such individual, of the amounts of wages of such individual and the periods of payments shown by such records at the time of such request. Such records shall be evidence, for the purpose of proceedings before the Board or any court, of the amounts of such wages and the periods in which they were paid, and the absence of an entry as to an individual's wages in such records for any period shall be evidence that no wages were paid such individual in such period.

(2) After the expiration of the fourth calendar year following any year in which wages were paid or are alleged to have been paid an individual, the records of the Board as to the wages of such individual for such year and the periods of payment shall be conclusive for the purposes of this title, except as hereafter provided.

(3) If, prior to the expiration of such fourth year, it is brought to the attention of the Board that any entry of such wages in such records is erroneous, or that any item of such wages has been omitted from the records, the Board may correct such entry or include such omitted item in its records, as the case may be. Written notice of any revision of any such entry, which is adverse to the interests of any individual, shall be given to such individual, in any case where such individual has previously been notified by the Board of the amount of wages and of the period of payments shown by such entry. Upon request in writing made prior to the expiration of such fourth year, or within sixty days thereafter, the Board shall afford any individual, or after his death shall afford the wife, child, or parent of such individual, reasonable notice and opportunity for hearing with respect to any entry or alleged omission of wages of such individual in such records, or any revision of any such entry. If a hearing is held, the Board shall make findings of fact and a decision based upon the evidence adduced at such hearing and shall revise its records as may be required by such findings and decision.

(4) After the expiration of such fourth year, the Board may revise any entry or include in its records any omitted item of wages to conform its records with tax returns or portions of tax returns (including information returns and other written statements) filed with the Commissioner of Internal Revenue under title VIII of the Social Security Act or the Federal Insurance Contributions Act or under regulations made under authority thereof. Notice shall be given of such revision under such conditions and to such individuals as is provided for revisions under paragraph (3) of this subsection. Upon request, notice and opportunity for hearing with respect to any



such entry, omission, or revision, shall be afforded under such conditions and to such individuals as is provided in paragraph (3) hereof, but no evidence shall be introduced at any such hearing except with respect to conformity of such records with such tax returns and such other data submitted under such title VIII or the Federal Insurance Contributions Act or under such regulations.

(5) Decisions of the Board under this subsection shall be reviewable by commencing a civil action in the district court of the United States as provided in subsection (g) hereof.

(l) The Board is authorized to delegate to any member, officer, or employee of the Board designated by it any of the powers conferred upon it by this section, and is authorized to be represented by its own attorneys in any court in any case or proceeding arising under the provisions of subsection (e).

(m) No application for any benefit under this title filed prior to three months before the first month for which the applicant becomes entitled to receive such benefit shall be accepted as an application for the purposes of this title.

#### DEFINITIONS

SEC. 209. When used in this title—

(a) The term “wages” means all remuneration for employment, including the cash value of all remuneration paid in any medium other than cash; except that such term shall not include—

(1) That part of the remuneration which, after remuneration equal to \$3,000 has been paid to an individual by an employer with respect to employment during any calendar year prior to 1940, is paid, prior to January 1, 1947, to such individual by such employer with respect to employment during such calendar year;

(2) That part of the remuneration which, after remuneration equal to \$3,000 has been paid to an individual with respect to employment during any calendar year after 1939, is paid to such individual, prior to January 1, 1947, with respect to employment during such calendar year;

(3) That part of the remuneration which, after remuneration equal to \$3,000 with respect to employment has been paid to an individual during any calendar year after 1946, is paid to such individual during such calendar year;

(4) The amount of any payment made to, or on behalf of, an employee under a plan or system established by an employer which makes provision for his employees generally or for a class or classes of his employees (including any amount paid by an employer for insurance or annuities, or into a fund, to provide for any such payment), on account of (A) retirement, or (B) sickness or accident disability, or (C) medical and hospitalization expenses in connection with sickness or accident disability, or (D) death, provided the employee (i) has not the option to receive, instead of provision for such death benefit, any part of such payment or, if such death benefit is insured, any part of the premiums (or contributions to premiums) paid by his employer, and (ii) has not the right, under the provisions of the plan or system or policy of insurance providing for such death benefit, to assign such benefit, or to receive a cash consideration in lieu of such benefit either upon his withdrawal from the plan or system providing for such benefit or upon termination of such plan or system or policy of insurance or of his employment with such employer;

(5) The payment by an employer (without deduction from the remuneration of the employee) (A) of the tax imposed upon an employee under section 1400 of the Internal Revenue Code or (B) of any payment required from an employee under a State unemployment compensation law;

(6) Dismissal payments which the employer is not legally required to make; or

(7) Any remuneration paid to an individual prior to January 1, 1937.

(b) The term “employment” means any service performed after December 31, 1936, and prior to January 1, 1940, which was employment as defined in section 210(b) of the Social Security Act prior to January 1, 1940 (except service performed by an individual after he attained the age of sixty-five if performed prior to January 1, 1939), and any service, of whatever nature, performed after December 31, 1939, by an employee for the person employing him, irrespective of the citizenship or residence of either, (A) within the United States, or (B) on or in connection with an American vessel under a contract of service which is entered into within the United States or during the performance of which the vessel touches at a port in the United States, if the employee is employed on and in connection with such vessel when outside the United States, except—

(1) Agricultural labor (as defined in subsection (1) of this section);

(2) Domestic service in a private home, local college club, or local chapter of a college fraternity or sorority;

(3) Casual labor not in the course of the employer's trade or business;

(4) Service performed by an individual in the employ of his son, daughter, or spouse, and service performed by a child under the age of twenty-one in the employ of his father or mother;

(5) Service performed or in connection with a vessel not an American vessel by an employee, if the employee is employed on and in connection with such vessel when outside the United States;

(6) Service performed in the employ of the United States Government, or of an instrumentality of the United States which is (A) wholly owned by the United States, or (B) exempt from the tax imposed by section 1410 of the Internal Revenue Code by virtue of any other provision of law;

(7) Service performed in the employ of a State, or any political subdivision thereof, or any instrumentality of any one or more of the foregoing which is wholly owned by one or more States or political subdivisions; and any service performed in the employ of any instrumentality of one or more States or political subdivisions to the extent that the instrumentality is with respect to such service, immune under the Constitution of the United States from the tax imposed by section 1410 of the Internal Revenue Code;

(8) Service performed in the employ of a corporation, community chest, fund, or foundation, organized and operated exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals, no part of the net earnings of which inures to the benefit of any private shareholder or individual, and no substantial part of the activities of which is carrying on propaganda, or otherwise attempting, to influence legislation;

(9) Service performed by an individual as an employee or employee representative as defined in section 1532 of the Internal Revenue Code;

(10)(A) Service performed in any calendar quarter in the employ of any organization exempt from income tax under section 101 of the Internal Revenue Code, if—

(i) the remuneration for such service does not exceed \$45, or

(ii) such service is in connection with the collection of dues or premiums for a fraternal beneficiary society, order, or association, and is performed away from the home office, or is ritualistic service in connection with any such society, order, or association, or

(iii) such service is performed by a student who is enrolled and is regularly attending classes at a school, college, or university;

(B) Service performed in the employ of an agricultural or horticultural organization exempt from income tax under section 101 (1) of the Internal Revenue Code;

(C) Service performed in the employ of a voluntary employees' beneficiary association providing for the payment of life, sick, accident, or other benefits to the members of such association or their dependents, if (i) no part of its net earnings inures (other than through such payments) to the benefit of any private shareholder or individual, and (ii) 85 per centum or more of the income consists of amounts collected from members for the sole purpose of making such payments and meeting expenses;

(D) Service performed in the employ of a voluntary employees' beneficiary association providing for the payment of life, sick, accident, or other benefits to the members of such association or their dependents or their designated beneficiaries, if (i) admission to membership in such association is limited to to<sup>3</sup> individuals who are officers or employees of the United States Government, and (ii) no part of the net earnings of such association inures (other than through such payments) to the benefit of any private shareholder or individual;

(E) Service performed in any calendar quarter in the employ of a school, college, or university, not exempt from income tax under section 101 of the Internal Revenue Code, if such service is performed by a student who is enrolled and is regularly attending classes at such school, college, or university, and the remuneration for such service does not exceed \$45 (exclusive of room, board, and tuition);

(11) Service performed in the employ of a foreign government (including service as a consular or other officer or employee or a nondiplomatic representative);

(12) Service performed in the employ of an instrumentality wholly owned by a foreign government—

(A) If the service is of a character similar to that performed in foreign countries by employees of the United States Government or of an instrumentality thereof; and

(B) If the Secretary of State shall certify to the Secretary of the Treasury that the foreign government, with respect to whose instrumentality and

<sup>3</sup>As in original. One "to" should be deleted.



employees thereof exemption is claimed, grants an equivalent exemption with respect to similar service performed in the foreign country by employees of the United States Government and of instrumentalities thereof;

(13) Service performed as a student nurse in the employ of a hospital or a nurses' training school by an individual who is enrolled and is regularly attending classes in a nurses' training school chartered or approved pursuant to State law; and service performed as an interne in the employ of a hospital by an individual who has completed a four years' course in a medical school chartered or approved pursuant to State law;

(14) Service performed by an individual in (or as an officer or member of the crew of a vessel while it is engaged in) the catching, taking, harvesting, cultivating, or farming of any kind of fish, shellfish, crustacea, sponges, seaweeds, or other aquatic forms of animal and vegetable life (including service performed by any such individual as an ordinary incident to any such activity), except (A) service performed in connection with the catching or taking of salmon or halibut, for commercial purposes, and (B) service performed on or in connection with a vessel of more than ten net tons (determined in the manner provided for determining the register tonnage of merchant vessels under the laws of the United States);

(15)(A) Service performed by an individual under the age of eighteen in the delivery or distribution of newspapers or shopping news, not including delivery or distribution to any point for subsequent delivery or distribution;

(B) Service performed by an individual in, and at the time of, the sale of newspapers or magazines to ultimate consumers, under an arrangement under which the newspapers or magazines are to be sold by him at a fixed price his compensation being based on the retention of the excess of such price over the amount at which the newspapers or magazines are charged to him, whether or not he is guaranteed a minimum amount of compensation for such service, or is entitled to be credited with the unsold newspapers or magazines turned back; or

(16) Service performed in the employ of an international organization entitled to enjoy privileges, exemptions, and immunities as an international organization under the International Organizations Immunities Act.

(c) If the services performed during one-half or more of any pay period by an employee for the person employing him constitute employment, all the services of such employee for such period shall be deemed to be employment; but if the services performed during more than one-half of any such pay period by an employee for the person employing him do not constitute employment, then none of the services of such employee for such period shall be deemed to be employment. As used in this subsection the term "pay period" means a period (of not more than thirty-one consecutive days) for which a payment of remuneration is ordinarily made to the employee by the person employing him. This subsection shall not be applicable with respect to services performed in a pay period by an employee for the person employing him, where any of such service is excepted by paragraph (9) of subsection (b).

(d) The term "American vessel" means any vessel documented or numbered under the laws of the United States; and includes any vessel which is neither documented or numbered under the laws of the United States nor documented under the laws of any foreign country, if its crew is employed solely by one or more citizens or residents of the United States or corporations organized under the laws of the United States or of any State.

(e) The term "primary insurance benefit" means an amount equal to the sum of the following—

(1)(A) 40 per centum of the amount of an individual's average monthly wage if such average monthly wage does not exceed \$50, or (B) if such average monthly wage exceeds \$50, 40 per centum of \$50, plus 10 per centum of the amount by which such average monthly wage exceeds \$50 and does not exceed \$250, and

(2) an amount equal to 1 per centum of the amount computed under paragraph (1) multiplied by the number of years in which \$200 or more of wages were paid to such individual. Where the primary insurance benefit thus computed is less than \$10, such benefit shall be \$10.

(f) The term "average monthly wage" means the quotient obtained by dividing the total wages paid an individual before the quarter in which he died or became entitled to receive primary insurance benefits, whichever first occurred, by three times the number of quarters elapsing after 1936 and before such quarter in which he died or became so entitled, excluding any quarter prior to the quarter in which he attained the age of twenty-two during which he was paid less than \$50 of wages and any quarter, after the quarter in which he attained age sixty-five, occurring prior to 1939.

(g) The term "fully insured individual" means any individual with respect to whom it appears to the satisfaction of the Board that—



(1) He had not less than one quarter of coverage for each two of the quarters lapsing after 1936, or after the quarter in which he attained the age of twenty-one, whichever quarter is later, and up to but excluding the quarter in which he attained the age of sixty-five, or died, whichever first occurred, and in no case less than six quarters of coverage; or

(2) He had at least forty quarters of coverage.

As used in this subsection, and in subsection (h) of this section, the term "quarter" and the term "calendar quarter" mean a period of three calendar months ending on March 31, June 30, September 30, or December 31; and the term "quarter of coverage" means a calendar quarter in which the individual has been paid not less than \$50 in wages. When the number of quarters specified in paragraph (1) of this subsection is an odd number, for purposes of such paragraph such number shall be reduced by one. In any case where an individual has been paid in a calendar year \$3,000 or more in wages, each quarter of such year following his first quarter of coverage shall be deemed a quarter of coverage, excepting any quarter in such year in which such individual dies or becomes entitled to a primary insurance benefit and any quarter succeeding such quarter in which he died or became so entitled.

(h) The term "currently insured individual" means any individual with respect to whom it appears to the satisfaction of the Administrator that he had not less than six quarters of coverage during the period consisting of the quarter in which he died and the twelve quarters immediately preceding such quarter.

(i) The term "wife" means the wife of an individual who either (1) is the mother of such individual's son or daughter, or (2) was married to him for a period of not less than thirty-six months immediately preceding the month in which her application is filed.

(j) The term "widow" (except when used in section 202(g)) means the surviving wife of an individual who either (1) is the mother of such individual's son or daughter, or (2) was married to him prior to the beginning of the twelfth month before the month in which he died.

(k) The term "child" means (1) the child of an individual, and (2) in the case of a living individual, a stepchild or adopted child who has been such stepchild or adopted child for thirty-six months immediately preceding the month in which application for child's benefits is filed, and (3) in the case of a deceased individual, a stepchild or adopted child who was such stepchild or adopted child for twelve months immediately preceding the month in which such individual died.

(l) The term "agricultural labor" includes all service performed—

(1) On a farm, in the employ of any person, in connection with cultivating the soil, or in connection with raising or harvesting any agricultural or horticultural commodity, including the raising, shearing, feeding, caring for, training, and management of livestock, bees, poultry, and fur-bearing animals and wildlife.

(2) In the employ of the owner or tenant or other operator of a farm, in connection with the operation, management, conservation, improvement, or maintenance of such farm and its tools and equipment, or in salvaging timber or clearing land of brush and other debris left by a hurricane, if the major part of such service is performed on a farm.

(3) In connection with the production or harvesting of maple sirup or maple sugar or any commodity defined as an agricultural commodity in section 15(g) of the Agricultural Marketing Act, as amended, or in connection with the raising or harvesting of mushrooms, or in connection with the hatching of poultry, or in connection with the ginning of cotton, or in connection with the operation or maintenance of ditches, canals, reservoirs, or waterways used exclusively for supplying and storing water for farming purposes.

(4) In handling, planting, drying, packing, packaging, processing, freezing, grading, storing, or delivering to storage or to market or to a carrier for transportation to market, any agricultural or horticultural commodity; but only if such service is performed as an incident to ordinary farming operations or, in the case of fruits and vegetables, as an incident to the preparation of such fruits or vegetables for market. The provisions of this paragraph shall not be deemed to be applicable with respect to service performed in connection with commercial canning or commercial freezing or in connection with any agricultural or horticultural commodity after its delivery to a terminal market for distribution for consumption.

As used in this subsection, the term "farm" includes stock, dairy, poultry, fruit, fur-bearing animal, and truck farms, plantations, ranches, nurseries, ranges, greenhouses or other similar structures used primarily for the raising of agricultural or horticultural commodities, and orchards.

(m) In determining whether an applicant is the wife, widow, child, or parent of a fully insured or currently insured individual for purposes of this title, the Board shall apply such law as would be applied in determining the devolution of intestate personal

property by the courts of the State in which such insured individual is domiciled at the time such applicant files application, or, if such insured individual is dead, by the courts of the State in which he was domiciled at the time of his death, or if such insured individual is or was not so domiciled in any State, by the courts of the District of Columbia. Applicants who according to such law would have the same status relative to taking intestate personal property as a wife, widow, child, or parent shall be deemed such.

(n) A wife shall be deemed to be living with her husband if they are both members of the same household, or she is receiving regular contributions from him toward her support, or he has been ordered by any court to contribute to her support; and a widow shall be deemed to have been living with her husband at the time of his death if they were both members of the same household on the date of his death, or she was receiving regular contributions from him toward her support on such date, or he had been ordered by any court to contribute to her support.

(o)(1) **OFFICERS AND MEMBERS OF CREWS EMPLOYED BY WAR SHIPPING ADMINISTRATION.**—The term “employment” shall include such service as is determined by the Administrator, War Shipping Administration, to be performed after September 30, 1941, and prior to the termination of title I of the First War Powers Act, 1941, on or in connection with any vessel by an officer or member of the crew as an employee of the United States employed through the War Shipping Administration or, in respect of such service performed before February 11, 1942, the United States Maritime Commission, but shall not include any such service performed (1) under a contract entered into without the United States and during the performance of which the vessel does not touch at a port in the United States, or (2) on a vessel documented under the laws of any foreign country and bareboat chartered to the War Shipping Administration.

(2) The Social Security Board shall not make determinations as to whether an individual has performed services which are employment by reason of this subsection, or the periods of such services, or the amounts of remuneration for such services, or the periods in which or for which such remuneration was paid, but shall accept the determinations with respect thereto of the Administrator, War Shipping Administration, and such agents as he may designate, as evidenced by returns filed by such Administrator as an employer pursuant to section 1426(i) of the Internal Revenue Code and certifications made pursuant to this subsection. Such determinations shall be final and conclusive.

(3) The Administrator, War Shipping Administration, is authorized and directed, upon written request of the Social Security Board, to make certification to it with respect to any matter determinable for the Board by the War Shipping Administrator under this subsection, which the Board finds necessary in administering this title.

(4) This subsection shall be effective as of September 30, 1941.

(p)(1) The term “employment” shall include such service as is determined by the Bonneville Power Administrator (hereinafter called the Administrator) to be performed after December 31, 1945, by a laborer, mechanic, or workman, in connection with construction work or the operation and maintenance of electrical facilities, as an employee performing service for the Administrator, but shall not include any service performed by such a laborer, mechanic, or workman, to whom the Act of May 29, 1930 (46 Stat. 468), as amended, applies.

(2) The Social Security Board shall not make determinations as to whether an individual has performed services which are employment by reason of this subsection, the periods of such services, the amounts of remuneration for such services which constitutes “wages” under the provisions of this section, or the periods in which or for which such wages were paid, but shall accept the determinations with respect thereto of the Administrator, and such agents as he may designate, as evidenced by returns filed by the Administrator as an employer pursuant to section 1426(j) of the Internal Revenue Code and certifications made pursuant to this subsection. Such determinations shall be final and conclusive.

(3) The Administrator is authorized and directed, upon written request of the Social Security Board, to make certification to it with respect to any matter determinable for the Board by the Administrator under this subsection, which the Board finds necessary in administering this title.

(q) Subject to such limitation as may be prescribed by regulation, the Administrator shall determine (or upon application shall recompute) the amount of any monthly benefit as though application for such benefit (or for recomputation) had been filed in the calendar quarter in which, all other conditions of entitlement being met, an application for such benefit would have yielded the highest monthly rate of benefit. This subsection shall not authorize the payment of a benefit for any month for which no benefit would, apart from this subsection, be payable, or, in the case of recomputation of a benefit, of the recomputed benefit for any month prior to the month for which application for recomputation is filed.



(r) With respect to wages paid to an individual in the six-month periods commencing either January 1, 1937, or July 1, 1937; (A) if wages of not less than \$100 were paid in any such period, one-half of the total amount thereof shall be deemed to have been paid in each of the calendar quarters in such period; and (B) if wages of less than \$100 were paid in any such period, the total amount thereof shall be deemed to have been paid in the latter quarter of such period, except that if in any such period, the individual attained age sixty-five, all of the wages paid in such period shall be deemed to have been paid before such age was attained.

## BENEFITS IN CASE OF DECEASED WORLD WAR II VETERANS

SEC. 210. (a) Any individual who has served in the active military or naval service of the United States at any time on or after September 16, 1940, and prior to the date of the termination of World War II, and who has been discharged or released therefrom under conditions other than dishonorable after active service of ninety days or more, or by reason of a disability or injury incurred or aggravated in service in line of duty, shall in the event of his death during the period of three years immediately following separation from the active military or naval service, whether his death occurs on, before, or after the date of the enactment of this section, be deemed—

(1) to have died a fully insured individual;

(2) to have an average monthly wage of not less than \$160; and

(3) for the purposes of section 209(e)(2), to have been paid not less than \$200 of wages in each calendar year in which he had thirty days or more of active service after September 16, 1940.

This section shall not apply in the case of the death of any individual occurring (either on, before, or after the date of the enactment of this section) while he is in the active military or naval service, or in the case of the death of any individual who has been discharged or released from the active military or naval service of the United States subsequent to the expiration of four years and one day after the date of the termination of World War II.

(b)(1) If any pension or compensation is determined by the Veterans' Administration to be payable on the basis of the death of any individual referred to in subsection (a) of this section, any monthly benefits or lump-sum death payment payable under this title with respect to the wages of such individual shall be determined without regard to such subsection (a).

(2) Upon an application for benefits or a lump-sum death payment with respect to the death of any individual referred to in subsection (a), the Federal Security Administrator shall make a decision without regard to paragraph (1) of this subsection unless he has been notified by the Veterans' Administration that pension or compensation is determined to be payable by the Veterans' Administration by reason of the death of such individual. The Federal Security Administrator shall notify the Veterans' Administration of any decision made by him authorizing payment, pursuant to subsection (a), of monthly benefits or of a lump-sum death payment. If the Veterans' Administration in any such case has made an adjudication or thereafter makes an adjudication that any pension or compensation is payable under any law administered by it, by reason of the death of any such individual, it shall notify the Federal Security Administrator, and the Administrator shall certify no further benefits for payment, or shall recompute the amount of any further benefits payable, as may be required by paragraph (1) of this subsection. Any payments theretofore certified by the Federal Security Administrator pursuant to subsection (a) to any individual, not exceeding the amount of any accrued pension or compensation payable to him by the Veterans' Administration, shall (notwithstanding the provisions of sec. 3 of the Act of August 12, 1935, as amended (U.S.C., 1940 edition, title 38, sec. 454(a)) be deemed to have been paid to him by the Veterans' Administration on account of such accrued pension or compensation. No such payment certified by the Federal Security Administrator, and no payment certified by him for any month prior to the first month for which any pension or compensation is paid by the Veterans' Administration, shall be deemed by reason of this subsection to have been an erroneous payment.

(c) In the event any individual referred to in subsection (a) has died during such three-year period but before the date of the enactment of this section—

(1) upon application filed within six months after the date of the enactment of this section, any monthly benefits payable with respect to the wages of such individual (including benefits for months before such date) shall be computed or recomputed and shall be paid in accordance with subsection (a), in the same manner as though such application had been filed in the first month in which all conditions of entitlement to such benefits, other than the filing of an application, were met;



(2) if any individual who upon filing application would have been entitled to benefits or to a recomputation of benefits under paragraph (1) has died before the expiration of six months after the date of the enactment of this section, the application may be filed within the same period by any other individual entitled to benefits with respect to the same wages, and the nonpayment or underpayment to the deceased individual shall be treated as erroneous within the meaning of section 204;

(3) the time within which proof of dependency under section 202(f) or any application under 202(g) may be filed shall be not less than six months after the date of the enactment of this section; and

(4) application for a lump-sum death payment or recomputation, pursuant to this section, of a lump-sum death payment certified by the Board or the Federal Security Administrator, prior to the date of the enactment of this section, for payment with respect to the wages of any such individual may be filed within a period not less than six months from the date of the enactment of this section or a period of two years after the date of the death of any individual specified in subsection (a), whichever is the later, and any additional payment shall be made to the same individual or individuals as though the application were an original application for a lump-sum death payment with respect to such wages.

No lump-sum death payment shall be made or recomputed with respect to the wages of an individual if any monthly benefit with respect to his wages is, or upon filing application would be, payable for the month in which he died; but except as otherwise specifically provided in this section no payment heretofore made shall be rendered erroneous by the enactment of this section.

(d) There are hereby authorized to be appropriated to the Trust Fund from time to time such sums as may be necessary to meet the additional cost, resulting from this section, of the benefits (including lump-sum death payments) payable under this title.

(e) For the purposes of this section the term "date of the termination of World War II" means the date proclaimed by the President as the date of such termination, or the date specified in a concurrent resolution of the two Houses of Congress as the date of such termination, whichever is the earlier.

Sec. 402. (a) (4) provide for granting to any individual, whose claim with respect to aid to a dependent child is denied, an opportunity for a fair hearing before such State agency;

(b) (2) who was born within the State within one year immediately preceding the application, if its mother has resided in the State for one year immediately preceding the birth.

Sec. 403. (a) From the sums appropriated therefor, the Secretary of the Treasury shall pay to each State which has an approved plan for aid to dependent children, for each quarter, beginning with the quarter commencing October 1, 1948, (1) an amount, which shall be used exclusively as aid to dependent children equal to the sum of the following proportions of the total amounts expended during such quarter as aid to dependent children under such plan, not counting so much of such expenditure with respect to any dependent child for any month as exceeds \$27, or if there is more than one dependent child in the same home, as exceeds \$27 with respect to one such dependent child and \$18 with respect to each of the other dependent children—

(A) three-fourths of such expenditures, not counting so much of any expenditures with respect to any month as exceeds the product of \$12 multiplied by the total number of dependent children with respect to whom aid to dependent children is paid for such month, plus

(B) one-half of the amount by which such expenditures exceed the maximum which may be counted under clause (A);

and (2) an amount equal to one-half of the total of the sums expended during such quarter as found necessary by the Administrator for the proper and efficient administration of the State plan, which amount shall be used for paying the costs of administering the State plan or for aid to dependent children, or both, and for no other purpose.

Sec. 406.

(b) The term "aid to dependent children" means money payments with respect to a dependent child or dependent children.

#### ALLOTMENTS TO STATES

SEC. 502. (a) Out of the sums appropriated pursuant to section 501 for each fiscal year the Federal Security Administrator shall allot \$5,500,000 as follows: He shall allot to each State \$35,000, and shall allot to each State such part of the remainder of the \$5,500,000 as he finds that the number of live births in such State bore to the total

number of live births in the United States, in the latest calendar year for which the Administrator has available statistics.

(b) Out of the sums appropriated pursuant to section 501 for each fiscal year the Secretary of Labor shall allot to the States \$5,500,000 (in addition to the allotments made under subsection (a)), according to the financial need of each State for assistance in carrying out its State plan, as determined by him after taking into consideration the number of live births in such State.

#### ALLOTMENTS TO STATES

SEC. 512. (a) Out of the sums appropriated pursuant to section 511 for each fiscal year the Federal Security Administrator shall allot \$3,750,000 as follows: He shall allot to each State \$30,000, and shall allot the remainder of the \$3,750,000 to the States according to the need of each State as determined by him after taking into consideration the number of crippled children in such State in need of the services referred to in section 511 and the cost of furnishing such services to them.

(b) Out of the sums appropriated pursuant to section 511 for each fiscal year the Secretary of Labor shall allot to the States \$3,750,000 (in addition to the allotments made under subsection (a)), according to the financial need of each State for assistance in carrying out its State plan, as determined by him after taking into consideration the number of crippled children in such State in need of the services referred to in section 511 and the cost of furnishing such services to them.

#### SEC. 541.

(c) The Administrator shall include in his annual report to Congress a full account of the administration of this title, except section 531.

### TITLE VII—SOCIAL SECURITY BOARD

#### ESTABLISHMENT

SECTION 701. There is hereby established a Social Security Board (in this Act referred to as the "Board") to be composed of three members to be appointed by the President, by and with the advice and consent of the Senate. During his term of membership on the Board, no member shall engage in any other business, vocation, or employment. Not more than two of the members of the Board shall be members of the same political party. Each member shall receive a salary at the rate of \$10,000 a year and shall hold office for a term of six years, except that (1) any member appointed to fill a vacancy occurring prior to the expiration of the term for which his predecessor was appointed, shall be appointed for the remainder of such term; and (2) the terms of office of the members first taking office after the date of the enactment of this Act shall expire, as designated by the President at the time of appointment, one at the end of two years, one at the end of four years, and one at the end of six years, after the date of the enactment of this Act. The President shall designate one of the members as the chairman of the Board.

#### REPORTS

SEC. 704. The Board shall make a full report to Congress, at the beginning of each regular session, of the administration of the functions with which it is charged.

#### SEC. 904.

(h) (2) the excess of taxes collected in each fiscal year beginning after June 30, 1946, and ending prior to July 1, 1949, under the Federal Unemployment Tax Act, over the unemployment administrative expenditures made in such year, and the excess of such taxes collected during the period beginning on July 1, 1949, and ending on December 31, 1949, over the unemployment administrative expenditures made during such period.

SEC. 1002. (a) (4) provide for granting to any individual, whose claim for aid is denied, an opportunity for a fair hearing before such State agency; (7) provide that no aid will be furnished any individual under the plan with respect to any period with respect to which he is receiving old-age assistance under the State plan approved under section 2 of this Act; (8) provide that the State agency shall, in determining need, take into consideration any other income and resources of an individual claiming aid to the blind; (8) provide that the State agency shall, in determining need, take into consideration any other income and resources of an individual claiming aid to the blind; except that the State agency may, in making such determination, disregard not to exceed \$50 per month of earned income;\* (10) provide that, in

\*P.L. 81-734, §341(c)(1), inserted this clause (8), effective October 1, 1950 and ending June 30, 1952.



determining whether an individual is blind, there shall be an examination by a physician skilled in diseases of the eye or by an optometrist;<sup>5</sup>

SEC. 1003.

(a) From the sums appropriated therefor, the Secretary of the Treasury shall pay to each State which has an approved plan for aid to the blind, for each quarter, beginning with the quarter commencing October 1, 1948, (1) an amount, which shall be used exclusively as aid to the blind, equal to the sum of the following proportions of the total amounts expended during such quarter as aid to the blind under the State plan with respect to each needy individual who is blind and is not an inmate of a public institution, not counting so much of such expenditure with respect to any such individual for any month as exceeds \$50—

(A) three-fourths of such expenditures, not counting so much of any expenditure with respect to any month as exceeds the product of \$20 multiplied by the total number of such individuals who received aid to the blind for such month, plus

(B) one-half of the amount by which such expenditures exceed the maximum which may be counted under clause (A);

and (2) an amount equal to one-half of the total of the sums expended during such quarter as found necessary by the Administrator for the proper and efficient administration of the State plan, which amount shall be used for paying the costs of administering the State plan or for aid to the blind, or both, and for no other purpose.

SEC. 1006. When used in this title the term "aid to the blind" means money payments to blind individuals who are needy.

SEC. 1101. (a)

(1) The term "State" includes Alaska, Hawaii, and the District of Columbia, and when used in Title V includes Puerto Rico and the Virgin Islands.

(6) The term "employee" includes an officer of a corporation, but such term does not include (1) any individual who, under the usual common-law rules applicable in determining the employer-employee relationship, has the status of an independent contractor or (2) any individual (except an officer of a corporation) who is not an employee under such common-law rules.

DISCLOSURE OF INFORMATION IN POSSESSION OF BOARD

SEC. 1106. No disclosure of any return or portion of a return (including information returns and other written statements) filed with the Commissioner of Internal Revenue under title VIII of the Social Security Act or the Federal Insurance Contributions Act or under regulations made under authority thereof, which has been transmitted to the Board by the Commissioner of Internal Revenue, or of any file, record, report, or other paper, or any information, obtained at any time by the Board or by any officer or employee of the Board in the course of discharging the duties of the Board, and no disclosure of any such file, record, report, or other paper, or information, obtained at any time by any person from the Board or from any officer or employee of the Board, shall be made except as the Board may by regulations prescribe. Any person who shall violate any provision of this section shall be deemed guilty of a misdemeanor and, upon conviction thereof, shall be punished by a fine not exceeding \$1,000, or by imprisonment not exceeding one year, or both.

**Provision of the Social Security Act as in Effect Prior to  
P.L. 81-814, Approved September 23, 1950 (64 Stat. 906)  
Revenue Act of 1950**

SEC. 211. (a)

(7) In the case of any taxable year beginning on or after the effective date specified in section 219, (A) the term "possession of the United States" as used in section 251 of the Internal Revenue Code shall not include Puerto Rico, and (B) a citizen or resident of Puerto Rico shall compute his net earnings from self-employment in the same manner as a citizen of the United States and without regard to the provisions of section 252 of such code.

<sup>5</sup>P.L. 81-734, §341(d), added this clause (10), effective October 1, 1950 and ending June 30, 1952.



**Provisions of the Social Security Act as in Effect Prior to  
P.L. 82-590, Approved July 18, 1952 (66 Stat. 767)  
Social Security Act Amendments of 1952**

SEC. 3. (a) From the sums appropriated therefor, the Secretary of the Treasury shall pay to each State which has an approved plan for old-age assistance, for each quarter, beginning with the quarter commencing October 1, 1950, (1) in the case of any State other than Puerto Rico and the Virgin Islands, an amount, which shall be used exclusively as old-age assistance, equal to the sum of the following proportions of the total amounts expended during such quarter as old-age assistance under the State plan, not counting so much of such expenditure with respect to any individual for any month as exceeds \$50—

(A) three-fourths of such expenditures, not counting so much of any expenditure with respect to any month as exceeds the product of \$20 multiplied by the total number of such individuals who received old-age assistance for such month; plus

(B) one-half of the amount by which such expenditures exceed the maximum which may be counted under clause (A); and (2) in the case of Puerto Rico and the Virgin Islands, an amount, which shall be used exclusively as old-age assistance, equal to one-half of the total of the sums expended during such quarter as old-age assistance under the State plan, not counting so much of such expenditure with respect to any individual for any month as exceeds \$30, and (3) in the case of any State, an amount equal to one-half of the total of the sums expended during such quarter as found necessary by the Administrator for the proper and efficient administration of the State plan, which amount shall be used for paying the costs of administering the State plan or for old-age assistance, or both, and for no other purpose.

SEC. 213. (a)

(2)(A) The term "quarter of coverage" means, in the case of any quarter occurring prior to 1951, a quarter in which the individual has been paid \$50 or more in wages. In the case of any individual who has been paid, in a calendar year prior to 1951, \$3,000 or more in wages each quarter of such year following his first quarter of coverage shall be deemed a quarter of coverage, excepting any quarter in such year in which such individual died or became entitled to a primary insurance benefit and any quarter succeeding such quarter in which he died or became so entitled.<sup>1</sup>

(2)(A) The term "quarter of coverage" means, in the case of any quarter occurring prior to 1951, a quarter in which the individual has been paid \$50 or more in wages, except that no quarter any part of which was included in a period of disability (as defined in section 216(i)), other than the initial quarter of such period, shall be a quarter of coverage. In the case of any individual who has been paid, in a calendar year prior to 1951, \$3,000 or more in wages, each quarter of such year following his first quarter of coverage shall be deemed a quarter of coverage, excepting any quarter in such year in which such individual died or became entitled to a primary insurance benefit and any quarter succeeding such quarter in which he died or became so entitled, and excepting any quarter any part of which was included in a period of disability, other than the initial quarter of such period.<sup>2</sup>

(B)

(i) no quarter after the quarter in which such individual died shall be a quarter of coverage;<sup>3</sup>

(i) no quarter after the quarter in which such individual died shall be a quarter of coverage, and no quarter any part of which was included in a period of disability (other than the initial quarter and the last quarter of such period) shall be a quarter of coverage;<sup>4</sup>

SEC. 214. (a)

(2)

(B) forty quarters of coverage.<sup>5</sup>

(B) forty quarters of coverage.<sup>6</sup>

<sup>1</sup>P.L. 82-590, §3(a)(1), amended this subparagraph (A), effective July 18, 1952. Effective July 1, 1953, this subparagraph (A) was reinstated.

<sup>2</sup>P.L. 82-590, §3(a)(1), added this subparagraph (A), effective only from July 18, 1952, to the close of June 30, 1953.

<sup>3</sup>P.L. 82-590, §3(a)(2), amended this clause (i), effective July 18, 1952. Effective July 1, 1953, this clause (i) was reinstated.

<sup>4</sup>P.L. 82-590, §3(a)(2), added this clause (i), effective only from July 18, 1952, to the close of June 30, 1953.

<sup>5</sup>P.L. 82-590, §3(a)(3), amended this subparagraph (B) effective July 18, 1952. Effective July 1, 1953, this subparagraph (B) was reinstated.

<sup>6</sup>P.L. 82-590, §3(a)(3), added this subparagraph (B), effective only from July 18, 1952, to the close of June 30, 1953.

## SEC. 215.

(a)(1) The primary insurance amount of an individual who attained age twenty-two after 1950 and with respect to whom not less than six of the quarters elapsing after 1950 are quarters of coverage shall be 50 per centum of the first \$100 of his average monthly wage plus 15 per centum of the next \$200 of such wage; except that if his average monthly wage is less than \$50, his primary insurance amount shall be the amount appearing in column II of the following table on the line on which in column I appears his average monthly wage.

I Average Monthly Wage	II Primary Insurance Amount
\$30 or less	\$20
\$31	\$21
\$32	\$22
\$33	\$23
\$34	\$24
\$35 to 49	\$25

(b)

(4) Notwithstanding the preceding provisions of this subsection, in computing an individual's average monthly wages, there shall not be taken into account any self-employment income of such individual for taxable years ending in or after the month in which he died or became entitled to old-age insurance benefits, whichever first occurred.<sup>7</sup>

(4) Notwithstanding the preceding provisions of this subsection, in computing an individual's average monthly wage, there shall not be taken into account—

(A) any self-employment income of such individual for taxable years ending in or after the month in which he died or became entitled to old-age insurance benefits, whichever first occurred;

(B) any wages paid such individual in any quarter any part of which was included in a period of disability unless such quarter was a quarter of coverage;

(C) any self-employment income of such individual for any taxable year all of which was included in a period of disability.<sup>8</sup>

(c)(1)

I  If the primary insurance benefit (as determined under subsection (d)) is:—	II  The primary insurance amount shall be:	III  And the average monthly wage for purpose of computing maximum benefits shall be:
\$10.....	\$20.00	\$40.00
\$11.....	22.00	44.00
\$12.....	24.00	48.00
\$13.....	26.00	52.00
\$14.....	28.00	56.00
\$15.....	30.00	60.00
\$16.....	31.70	63.40
\$17.....	33.20	66.40
\$18.....	34.50	69.00
\$19.....	35.70	71.40
\$20.....	37.00	74.00
\$21.....	38.50	77.00
\$22.....	40.20	80.40
\$23.....	42.20	84.40
\$24.....	44.50	89.00
\$25.....	46.50	93.00
\$26.....	48.30	96.60
\$27.....	50.00	100.00
\$28.....	51.50	110.00
\$29.....	52.80	118.60
\$30.....	54.00	126.60
\$31.....	55.10	134.00
\$32.....	56.20	141.30
\$33.....	57.20	148.00

<sup>7</sup>P.L. 82-590, §3(c)(2), amended this paragraph (4), effective July 18, 1952. Effective July 1, 1953, this paragraph (4) was reinstated.

<sup>8</sup>P.L. 82-590, §3(c)(2), added this paragraph (4), effective only from July 18, 1952 to the close of June 30, 1953.

I  If the primary insurance benefit (as determined under subsection (d)) is:—	II  The primary insurance amount shall be:	III  And the average monthly wage for purpose of computing maximum benefits shall be:
\$34.....	58.20	154.60
\$35.....	59.20	161.30
\$36.....	60.20	168.00
\$37.....	61.20	174.60
\$38.....	62.20	181.30
\$39.....	63.10	187.30
\$40.....	64.00	195.00
\$41.....	64.90	210.00
\$42.....	65.80	220.00
\$43.....	66.70	230.00
\$44.....	67.60	240.00
\$45.....	68.50	250.00
\$46.....	68.50	250.00

(2) In case the primary insurance benefit of an individual (determined as provided in subsection (d)) falls between the amounts on any two consecutive lines in column I of the table, the amount referred to in paragraph (3) and clause (B) of paragraph (2) of subsection (a) for such individual, and his average monthly wage for purposes of section 203(a), shall be determined in accordance with regulations of the Administrator designed to obtain results consistent with those obtained for individuals whose primary insurance benefits are shown in column I of the table.

(d)

(5) In the case of any individual to whom paragraph (1), (2), or (4) of this subsection is applicable, his primary insurance benefit shall be computed as provided therein; except that, for purposes of paragraphs (1) and (2) and subparagraph (C) of paragraph (4), any quarter prior to 1951 any part of which was included in a period of disability shall be excluded from the elapsed quarters unless it was a quarter of coverage, and any wages paid in any such quarter shall not be counted.<sup>9</sup>

(f)

(2) Upon application by an individual entitled to old-age insurance benefits, the Administrator shall recompute his primary insurance amount if application therefor is filed after the twelfth month for which deductions under paragraph (1) or (2) of section 203(b) have been imposed (within a period of thirty-six months) with respect to such benefit, not taking into account any month prior to September 1950 or prior to the earliest month for which the last previous computation of his primary insurance amount was effective, and if not less than six of the quarters elapsing after 1950 and prior to the quarter in which he filed such application are quarters of coverage. A recomputation under this paragraph shall be made only as provided in subsection (a)(1) and shall take into account only such wages and self-employment income as would be taken into account under subsection (b) if the month in which application for recomputation is filed were deemed to be the month in which the individual became entitled to old-age insurance benefits. Such recomputation shall be effective for and after the month in which such application for recomputation is filed.

SEC. 216.

#### Disability; Period of Disability<sup>10</sup>

(i)(1) The term "disability means (A) inability to engage in any substantially gainful activity by reason of any medically determinable physical or mental impairment which can be expected to be permanent, or (B) blindness; and the term "blindness" means central visual acuity of 5/200 or less in the better eye with the use of correcting lenses. An eye in which the visual field is reduced to five degrees or less concentric contraction shall be considered for the purpose of this paragraph as having a central visual acuity of 5/200 or less. An individual shall not be considered to be under a disability unless he furnishes such proof of the existence thereof as may be required.

(2) The term "period of disability" means a continuous period of not less than six full calendar months (beginning and ending as hereinafter provided in this subsection) during which an individual was under a disability (as defined in paragraph (1)).

<sup>9</sup>P.L. 82-590, §3(c)(3), added this paragraph (5), effective only from July 18, 1952, to the close of June 30, 1953.

<sup>10</sup>P.L. 82-590, §3(d), added this subsection (i), effective only from July 18, 1952, to the close of June 30, 1953.



such period with respect to any disability shall begin as to any individual unless such individual, while under such disability, files an application for a disability determination. Except as provided in paragraph (4), a period of disability shall begin on whichever of the following days is the latest:

- (A) the day the disability began;
- (B) the first day of the one-year period which ends with the day before the day on which the individual filed such application; or
- (C) the first day of the first quarter in which he satisfies the requirements of paragraph (3).

A period of disability shall end on the day on which the disability ceases. No application for a disability determination which is filed more than three months before the first day on which a period of disability can begin (as determined under this paragraph) shall be accepted as an application for the purposes of this paragraph, and no such application which is filed prior to July 1, 1953, shall be accepted.

(3) The requirements referred to in paragraphs (2) (C) and (4) (B) are satisfied by an individual with respect to any quarter only if he had not less than—

- (A) six quarters of coverage (as defined in section 213(a)(2)) during the thirteen-quarter period which ends with such quarter; and
- (B) twenty quarters of coverage during the forty-quarter period which ends with such quarter,

not counting as part of the thirteen-quarter period specified in clause (A), or the forty-quarter period specified in clause (B), any quarter any part of which was included in a prior period of disability unless such quarter was a quarter of coverage.

(4) If an individual files an application for a disability determination after June 1953, and before January 1955, with respect to a disability which began before July 1953, and continued without interruption until such application was filed, then the beginning day for the period of disability shall be whichever of the following days is the later:

- (A) the day such disability began; or
- (B) the first day of the first quarter in which he satisfies the requirements of paragraph (3).

#### DISABILITY PROVISIONS INAPPLICABLE IF BENEFITS WOULD BE REDUCED<sup>11</sup>

SEC. 220. The provisions of this title relating to periods of disability shall not apply in the case of any monthly benefit or lump-sum death payment if such benefit or payment would be greater without the application of such provisions.

#### DISABILITY DETERMINATIONS TO BE MADE BY STATE AGENCIES<sup>12</sup>

SEC. 221. (a) In the case of any individual, the determination of whether or not he is under a disability (as defined in section 216(i)(1)) and of the day such disability began, and the determination of the day on which such disability ceases, shall be made by a State agency pursuant to an agreement entered into under subsection (b).

(b) The Administrator shall enter into an agreement with each State which is willing to make such an agreement under which the State agency administering or supervising the administration of the State plan approved under title XIV, the State agency or agencies administering the State plan approved under the Vocational Rehabilitation Act, or the State agency administering the workmen's compensation law of such State, as may be designated in the agreement, will make the determinations referred to in subsection (a) with respect to individuals in such State.

(c) Notwithstanding the provisions of subsection (a), the Administrator may, after reasonable notice and opportunity for a hearing to an individual who has been determined by a State agency pursuant to an agreement under this section to be under a disability, determine that such individual is not under a disability or that such disability began on a day later than that determined by such agency. Such a determination by the Administrator shall be the determination used for purposes of section 216(i) in lieu of that made by such State agency.

(d) Each State which has an agreement with the Administrator under this section shall be entitled to receive from the Trust Fund, in advance or by way of reimbursement, as may be mutually agreed upon, the cost to the State of carrying out the agreement under this section. The Administrator shall from time to time certify such amount as is necessary for this purpose to the Managing Trustee and the Managing Trustee, prior to audit or settlement by the General Accounting Office, shall make payment from the Trust Fund at the time or times fixed by the Administrator, in accordance with such certification.

<sup>11</sup>P.L. 82-590, §3(e), added this §220, effective July 18, 1952, to the close of June 30, 1953.

<sup>12</sup>P.L. 82-590, §3(e), added this §221, effective July 18, 1952, to the close of June 30, 1953.

(e) All money paid to a State under this section shall be used solely for the purposes for which it is paid; and any money which is so paid which is not used for such purposes shall be returned to the Treasury for deposit in the Trust Fund.

SEC. 403. (a) From the sums appropriated therefor, the Secretary of the Treasury shall pay to each State which has an approved plan for aid to dependent children, for each quarter, beginning with the quarter commencing October 1, 1950, (1) in the case of any State other than Puerto Rico and the Virgin Islands, an amount, which shall be used exclusively as aid to dependent children, equal to the sum of the following proportions of the total amounts expended during such quarter as aid to dependent children under the State plan, not counting so much of such expenditure with respect to any dependent child for any month as exceeds \$27, or if there is more than one dependent child in the same home, as exceeds \$27 with respect to one such dependent child and \$18 with respect to each of the other dependent children, and not counting so much of such expenditure for any month with respect to a relative with whom any dependent child is living as exceeds \$27—

(A) three-fourths of such expenditures, not counting so much of the expenditures with respect to any month as exceeds the product of \$12 multiplied by the total number of dependent children and other individuals with respect to whom aid to dependent children is paid for such month, plus

(B) one-half of the amount by which such expenditures exceed the maximum which may be counted under clause (A);

and (2) in the case of Puerto Rico and the Virgin Islands, an amount, which shall be used exclusively as aid to dependent children, equal to one-half of the total of the sums expended during such quarter as aid to dependent children under the State plan, not counting so much of such expenditure with respect to any dependent child for any month as exceeds \$18, or if there is more than one dependent child in the same home, as exceeds \$18 with respect to one such dependent child and \$12 with respect to each of the other dependent children; and (3) in the case of any State, and<sup>13</sup> amount equal to one-half of the total of the sums expended during such quarter as found necessary by the Administrator for the proper and efficient administration of the State plan, which amount shall be used for paying the costs of administering the State plan or for aid to dependent children, or both, and for no other purpose.

SEC. 1003. (a) From the sums appropriated therefor, the Secretary of the Treasury shall pay to each State which has an approved plan for aid to the blind, for each quarter, beginning with the quarter commencing October 1, 1950, (1) in the case of any State other than Puerto Rico and the Virgin Islands, an amount, which shall be used exclusively as aid to the blind, equal to the sum of the following proportions of the total amounts expended during such quarter as aid to the blind under the State plan, not counting so much of such expenditure with respect to any individual for any month as exceeds \$50—

(A) three-fourths of such expenditures, not counting so much of any expenditure with respect to any month as exceeds the product of \$20 multiplied by the total number of such individuals who received aid to the blind for such month, plus

(B) one-half of the amount by which such expenditures exceed the maximum which may be counted under clause (A);

and (2) in the case of Puerto Rico and the Virgin Islands, an amount, which shall be used exclusively as aid to the blind, equal to one-half of the total of the sums expended during such quarter as aid to the blind under the State plan, not counting so much of such expenditure with respect to any individual for any month as exceeds \$30; and (3) in the case of any State, an amount equal to one-half of the total of the sums expended during such quarter as found necessary by the Administrator for the proper and efficient administration of the State plan, which amount shall be used for paying the costs of administering the State plan or for aid to the blind, or both, and for no other purpose.

SEC. 1403. (a) From the sums appropriated therefor, the Secretary of the Treasury shall pay to each State which has an approved plan for aid to the permanently and totally disabled, for each quarter, beginning with the quarter commencing October 1, 1950, (1) in the case of any State other than Puerto Rico and the Virgin Islands, an amount, which shall be used exclusively as aid to the permanently and totally disabled, equal to the sum of the following proportions of the total amounts expended during such quarter as aid to the permanently and totally disabled under the State plan, not counting so much of such expenditure with respect to any individual for any month as exceeds \$50—

(A) three-fourths of such expenditures, not counting so much of any expenditure with respect to any month as exceeds the product of \$20 multiplied by the total

<sup>13</sup>As in original; "and" should be "an".



number of such individuals who received aid to the permanently and totally disabled for such month, plus

(B) one-half of the amount by which such expenditures exceed the maximum which may be counted under clause (A);

and (2) in the case of Puerto Rico and the Virgin Islands, an amount, which shall be used exclusively as aid to the permanently and totally disabled, equal to one-half of the total of the sums expended during such quarter as aid to the permanently and totally disabled under the State plan, not counting so much of such expenditure with respect to any individual for any month as exceeds \$30; and (3) in the case of any State, an amount equal to one-half of the total of the sums expended during such quarter as found necessary by the Administrator for the proper and efficient administration of the State plan, which amount shall be used for paying the costs of administering the State plan or for aid to the permanently and totally disabled, or both, and for no other purpose.

---

**Provisions of the Social Security Act as in Effect Prior to  
P.L. 83-567, Approved August 5, 1954 (68 Stat. 668)  
Employment Security Administrative Financing Act of 1954**

## **TITLE IX—TAX ON EMPLOYERS OF EIGHT OR MORE**

### **SEC. 904.**

(g) The Secretary of the Treasury is authorized and directed, prior to audit or settlement by the General Accounting Office, to make transfers from the Federal unemployment account to the account of any State in the Unemployment Trust Fund in accordance with certification made by the Board pursuant to section 1201, not exceeding the amount on deposit in the Federal unemployment account at the time of such transfer.

(h) (2) the excess of the taxes collected in each fiscal year beginning after June 30, 1946, and ending prior to July 1, 1951, under the Federal Unemployment Tax Act, over the unemployment administrative expenditures made in such year, and the excess of such taxes collected during the period beginning on July 1, 1951, and ending on December 31, 1951, over the unemployment administrative expenditures made during such period

## **TITLE XII—ADVANCES TO STATE UNEMPLOYMENT FUNDS**

SEC. 1201. (a) In the event that the balance in a State's account in the Unemployment Trust Fund on June 30, 1947, or on the last day in any ensuing calendar quarter which ends prior to January 1, 1952, does not exceed a sum equal to the total contributions deposited in the Unemployment Trust Fund under the unemployment compensation law of the State during that one of the two calendar years next preceding such day in which such deposits were higher, the State shall be entitled, subject to the provisions of subsections (b) and (c) hereof, to have transferred from the Federal unemployment account to its account in the Unemployment Trust Fund an amount equal to the amount by which the unemployment compensation paid out by it in the calendar quarter ending on such day exceeded 2.7 per centum of the total remuneration which was paid during such quarter and was subject to the State unemployment compensation law.

(b) The Social Security Board is authorized and directed, on application of a State unemployment compensation agency, to make findings as to whether the conditions for the transfer of moneys provided for in subsection (a) hereof have been met; and if such conditions exist, the Board is directed to certify, to the Secretary of the Treasury, from time to time, the amounts for transfer in order to carry out the purposes of this title, reduced or increased, as the case may be, by any sum by which the Board finds that the amounts transferred for any prior quarter were greater or less than the amounts to which the State was entitled for such quarter. The application of a State agency shall be made on such forms, and contain such information and data, fiscal and otherwise, concerning the operation and administration of the State law, as the Board deems necessary or relevant to the performance of its duties hereunder.

(c) Any amount transferred to the account of any State under this section shall be treated as an advance, without interest, to the unemployment fund of such State and shall be repaid to the Federal unemployment account from the unemployment fund of



that State to the extent that the balance in the State's account in the Unemployment Trust Fund, at the end of any calendar quarter, exceeds a sum equal to the total contributions deposited in the Unemployment Trust Fund under the unemployment compensation law of the State during that one of the two calendar years next preceding such day in which such deposits were higher. The Secretary of the Treasury shall, after the end of each calendar quarter, transfer from the unemployment account of each State in the Unemployment Trust Fund to the Federal unemployment account the amount required to be repaid from the unemployment fund of such State at the end of such quarter under this subsection.

**Provisions of the Social Security Act as in Effect Prior to  
P.L. 83-761, Approved September 1, 1954 (68 Stat. 1052)  
Social Security Amendments of 1954**

**SEC. 202.**

**(e)(1)**

(C) has filed application for widow's insurance benefits or was entitled, after attainment of retirement age, to wife's insurance benefits, on the basis of the wages and self-employment income of such individual, for the month preceding the month in which he died,

**(g)(1)**

(D) has filed application for mother's insurance benefits,

**Maximum Benefits**

SEC. 203. (a) Whenever the total of monthly benefits to which individuals are entitled under section 202 for a month on the basis of the wages and self-employment income of an insured individual exceeds \$168.75, or is more than \$45 and exceeds 80 per centum of his average monthly wage (as determined under subsection (b) or (c) of section 215, whichever is applicable), such total of benefits shall, after any deductions under this section, be reduced to \$168.75 or to 80 per centum of his average monthly wage, whichever is the lesser, but in no case to less than \$45, except that when any of such individuals so entitled would (but for the provisions of section 202(k)(2)(A)) be entitled to child's insurance benefits on the basis of the wages and self-employment income of one or more other insured individuals, such total of benefits shall, after any deductions under this section, be reduced to \$168.75 or to 80 per centum of the sum of the average monthly wages of all such insured individuals, whichever is the lesser, but in no case to less than \$45. Whenever a reduction is made under this subsection, each benefit, except the old-age insurance benefit, shall be proportionately decreased.

**(b)**

(1) in which such individual is under the age of seventy-two<sup>1</sup> and in which he rendered services for wages (as determined under section 209 without regard to subsection (a) thereof) of more than \$75; or

(2) in which such individual is under the age of seventy-two<sup>2</sup> and for which month he is charged, under the provisions of subsection (e) of this section, with net earnings from self-employment of more than \$75; or

**(c)**

(1) in which the individual, on the basis of whose wages and self-employment income such benefit was payable, is under the age of seventy-two<sup>3</sup> and in which he rendered services for wages (as determined under section 209 without regard to subsection (a) thereof) of more than \$75; or

(2) in which the individual referred to in paragraph (1) is under the age of seventy-two<sup>4</sup> and for which month he is charged, under the provisions of subsection (e) of this section, with net earnings from self-employment of more than \$75.

**Months to Which Net Earnings From Self-Employment Are Charged**

**(e)**

(1) If an individual's net earnings from self-employment for his taxable year are not more than the product of \$75 times the number of months in such year, no

<sup>1</sup>P.L. 83-761, §103(i)(3), struck out "seventy-five" and substituted "seventy-two", effective only with respect to months after 1954.

<sup>2</sup>See footnote 1.

<sup>3</sup>See footnote 1.

<sup>4</sup>See footnote 1.

month in such year shall be charged with more than \$75 of net earnings from self-employment.

(2) If an individual's net earnings from self-employment for his taxable year are more than the product of \$75 times the number of months in such year, each month of such year shall be charged with \$75 of net earnings from self-employment, and the amount of such net earnings in excess of such product shall be further charged to months as follows: The first \$75 of such excess shall be charged to the last month of such taxable year, and the balance, if any, of such excess shall be charged at the rate of \$75 per month to each preceding month in such year until all of such balance has been applied, except that no part of such excess shall be charged to any month (A) for which such individual was not entitled to a benefit under this title, (B) in which an event described in paragraph (1), (3), (4), or (5) of subsection (b) occurred, (C) in which such individual was age seventy-two<sup>5</sup> or over, or (D) in which such individual did not engage in self-employment.

(3)

(B) For the purposes of clause (D) of paragraph (2), an individual will be presumed, with respect to any month, to have been engaged in self-employment in such month until it is shown to the satisfaction of the Administrator that such individual rendered no substantial services in such month with respect to any trade or business the net income or loss of which is includible in computing his net earnings from self-employment for any taxable year. The Administrator shall by regulations prescribe the methods and criteria for determining whether or not an individual has rendered substantial services with respect to any trade or business.

#### Penalty for Failure to Report Certain Events

(f) Any individual in receipt of benefits subject to deduction under subsection (b) or (c) (or who is in receipt of such benefits on behalf of another individual), because of the occurrence of an event specified therein (other than an event described in subsection (b) (2) or (c) (2)), shall report such occurrence to the Administrator prior to the receipt and acceptance of an insurance benefit for the second month following the month in which such event occurred. Any such individual having knowledge thereof, who fails to report any such occurrence, shall suffer an additional deduction equal to that imposed under subsection (b) or (c), except that the first additional deduction imposed by this subsection in the case of any individual shall not exceed an amount equal to one month's benefit even though the failure to report is with respect to more than one month.

#### Report to Administrator of Net Earnings From Self-Employment

(g)

(2) If an individual fails to make a report required under paragraph (1), within the time prescribed therein, of his net earnings from self-employment for any taxable year and any deduction is imposed under subsection (b) (2) by reason of such net earnings—

(A) such individual shall suffer one additional deduction in an amount equal to his benefit or benefits for the last month in such taxable year for which he was entitled to a benefit under section 202; and

(B) if the failure to make such report continues after the close of the fourth calendar month following the close of such taxable year, such individual shall suffer an additional deduction in the same amount for each month during all or any part of which such failure continues after such fourth month; except that the number of the additional deductions required by this paragraph shall not exceed the number of months in such taxable year for which such individual received and accepted insurance benefits under section 202 and for which deductions are imposed under subsection (b) (2) by reason of such net earnings from self-employment. If more than one additional deduction would be imposed under this paragraph with respect to a failure by an individual to file a report required by paragraph (1) and such failure is the first for which any additional deduction is imposed under this paragraph, only one additional deduction shall be imposed with respect to such first failure.

#### Deductions With Respect to Certain Lump Sum Payments

(i) Deductions shall also be made from any old-age insurance benefit to which an individual is entitled, or from any other insurance benefit payable on the basis of such

<sup>5</sup>See footnote 1.



individual's wages and self-employment income, until such deductions total the amount of any lump-sum paid to such individual under section 204 of the Social Security Act in force prior to the date of enactment of the Social Security Act Amendments of 1939.

#### Sec. 209.

(a) That part of the remuneration which, after remuneration (other than remuneration referred to in the succeeding subsections of this section) equal to \$3,600 with respect to employment has been paid to an individual during any calendar year, is paid to such individual during such calendar year;

(g)

(2) Cash remuneration paid by an employer in any calendar quarter to an employee for domestic service in a private home of the employer, if the cash remuneration paid in the quarter for such service is less than \$50 or the employee is not regularly employed by the employer in such quarter of payment. For the purposes of this paragraph, an employee shall be deemed to be regularly employed by an employer during a calendar quarter only if (A) on each of some twenty-four days during the quarter the employee performs for the employer for some portion of the day domestic service in a private home of the employer, or (B) the employee was regularly employed (as determined under clause (A)) by the employer in the performance of such service during the preceding calendar quarter. As used in this paragraph, the term "domestic service in a private home of the employer" does not include service described in section 210(f)(5);

#### Sec. 210.

(a) (B) outside the United States by a citizen of the United States as an employee for an American employer (as defined subsection (e));

(1)(A) Agricultural labor (as defined in subsection (f) of this section) performed in any calendar quarter by an employee, unless the cash remuneration paid for such labor (other than service described in subparagraph (B)) is \$50 or more and such labor is performed for an employer by an individual who is regularly employed by such employer to perform such agricultural labor. For the purposes of this subparagraph, an individual shall be deemed to be regularly employed by an employer during a calendar quarter only if—

(i) such individual performs agricultural labor (other than service described in subparagraph (B)) for such employer on a full-time basis on sixty days during such quarter, and

(ii) the quarter was immediately preceded by a qualifying quarter.

For the purposes of the preceding sentence, the term "qualifying quarter" means (I) any quarter during all of which such individual was continuously employed by such employer, or (II) any subsequent quarter which meets the test of clause (i) if, after the last quarter during all of which such individual was continuously employed by such employer, each intervening quarter met the test of clause (i). Notwithstanding the preceding provisions of this subparagraph, an individual shall also be deemed to be regularly employed by an employer during a calendar quarter if such individual was regularly employed (upon application of clauses (i) and (ii) by such employer during the preceding calendar quarter.

(B) Service performed in connection with the production or harvesting of any commodity defined as an agricultural commodity in section 15(g) of the Agricultural Marketing Act, as amended, or in connection with the ginning of cotton;

(C) Service performed by foreign agricultural workers under contracts entered into in accordance with title V of the Agricultural Act of 1949, as amended.

(3) Service not in the course of the employer's trade or business performed in any calendar quarter by an employee, unless the cash remuneration paid for such service is \$50 or more and such service is performed by an individual who is regularly employed by such employer to perform such service. For the purposes of this paragraph, an individual shall be deemed to be regularly employed by an employer during a calendar quarter only if (A) on each of some twenty-four days during such quarter such individual performs for such employer for some portion of the day service not in the course of the employer's trade or business, or (B) such individual was regularly employed (as determined under clause (A)) by such employer in the performance of such service during the preceding calendar quarter. As used in this paragraph, the term "service not in the course of the employer's trade or business" does not include domestic service in a private home of the employer and does not include service described in subsection (f)(5);

(6)

(C) Service performed in the employ of the United States or in the employ of any instrumentality of the United States, if such service is performed—

(i) as the President or Vice President of the United States or as a Member, Delegate, or Resident Commissioner, of or to the Congress;



- (ii) in the legislative branch;
  - (iii) in the field service of the Post Office Department unless performed by any individual as an employee who is excluded by Executive order from the operation of the Civil Service Retirement Act of 1930 because he is serving under a temporary appointment pending final determination of eligibility for permanent or indefinite appointment;
  - (iv) in or under the Bureau of the Census of the Department of Commerce by temporary employees employed for the taking of any census;
  - (v) by any individual as an employee who is excluded by Executive order from the operation of the Civil Service Retirement Act of 1930 because he is paid on a contract or fee basis;
  - (vi) by any individual as an employee receiving nominal compensation of \$12 or less per annum;
  - (vii) in a hospital, home, or other institution of the United States by a patient or inmate thereof;
  - (viii) by any individual as a consular agent appointed under authority of section 551 of the Foreign Service Act of 1946 (22 U.S.C., sec. 951);
  - (ix) by any individual as an employee included under section 2 of the Act of August 4, 1947 (relating to certain interns, student nurses, and other student employees of hospitals of the Federal Government; 5 U.S.C., sec. 1052);
  - (x) by any individual as an employee serving on a temporary basis in case of fire, storm, earthquake, flood, or other similar emergency;
  - (xi) by any individual as an employee who is employed under a Federal relief program to relieve him from unemployment;
  - (xii) as a member of a State, county, or community committee under the Production and Marketing Administration or of any other board, council, committee, or other similar body, unless such board, council, committee, or other body is composed exclusively of individuals otherwise in the full-time employ of the United States; or
  - (xiii) by an individual to whom the Civil Service Retirement Act of 1930 does not apply because such individual is subject to another retirement system;
- (15) Service performed by an individual in (or as an officer or member of the crew of a vessel while it is engaged in) the catching, taking, harvesting, cultivating, or farming of any kind of fish, shellfish, crustacea, sponges, seaweeds, or other aquatic forms of animal and vegetable life (including service performed by any such individual as an ordinary incident to any such activity), except (A) service performed in connection with the catching or taking of salmon or halibut, for commercial purposes, and (B) service performed on or in connection with a vessel of more than ten net tons (determined in the manner provided for determining the register tonnage of merchant vessels under the laws of the United States);

## SEC. 211.

(a)

(1) There shall be excluded rentals from real estate (including personal property leased with the real estate) and deductions attributable thereto, unless such rentals are received in the course of a trade or business as a real estate dealer;

(2) There shall be excluded income derived from any trade or business in which, if the trade or business were carried on exclusively by employees, the major portion of the services would constitute agricultural labor as defined in section 210(f); and there shall be excluded all deductions attributable to such income;

(b)

(1) That part of the net earnings from self-employment which is in excess of: (A) \$3,600, minus (B) the amount of the wages paid to such individual during the taxable year; or

(c)

(5) The performance of service by an individual in the exercise of his profession as a physician, lawyer, dentist, osteopath, veterinarian, chiropractor, naturopath, optometrist, Christian Science practitioner, architect, certified public accountant, accountant registered or licensed as an accountant under State or municipal law, full-time practicing public accountant, funeral director, or professional engineer; or the performance of such service by a partnership.

## SEC. 213. (a)

(2)(A) The term "quarter of coverage" means, in the case of any quarter occurring prior to 1951, a quarter in which the individual has been paid \$50 or more in wages. In the case of any individual who has been paid, in a calendar year prior to 1951, \$3,000 or more in wages each quarter of such year following his first quarter of coverage shall

be deemed a quarter of coverage, excepting any quarter in such year in which such individual died or became entitled to a primary insurance benefit and any quarter succeeding such quarter in which he died or became so entitled.

(B)

(i) no quarter after the quarter in which such individual died shall be a quarter of coverage;

(ii) if the wages paid to any individual in a calendar year equal or exceed \$3,600, each quarter of such year shall (subject to clause (i)) be a quarter of coverage;

(iii) if an individual has self-employment income for a taxable year, and if the sum of such income and the wages paid to him during such taxable year equals \$3,600, each quarter any part of which falls in such year shall be a quarter of coverage; and

(iv) no quarter shall be counted as a quarter of coverage prior to the beginning of such quarter.

SEC. 214.

(a)

(2)

(B) forty quarters of coverage.

#### PRIMARY INSURANCE AMOUNT

SEC. 215.

(a)(1) The primary insurance amount of an individual who attained age twenty-two after 1950 and with respect to whom not less than six of the quarters elapsing after 1950 are quarters of coverage shall be 55 per centum of the first \$100 of his average monthly wage, plus 15 per centum of the next \$200 of such wage; except that, if his average monthly wage is less than \$48, his primary insurance amount shall be the amount appearing in column II of the following table on the line on which in column I appears his average monthly wage.

I	II
Average Monthly Wage	Primary Insurance Amount
\$34 or less.....	\$25
\$35 through \$47.....	\$26

(2) The primary insurance amount of an individual who attained age twenty-two prior to 1951 and with respect to whom not less than six of the quarters elapsing after 1950 are quarters of coverage shall be whichever of the following is the larger—

(A) the amount computed as provided in paragraph (1) of this subsection; or

(B) the amount determined under subsection (c).

(3) The primary insurance amount of any other individual shall be the amount determined under subsection (c).

(b)(1) An individual's "average monthly wage" shall be the quotient obtained by dividing the total of—

(A) his wages after his starting date (determined under paragraph (2)) and prior to his wage closing date (determined under paragraph (3)), and

(B) his self-employment income after such starting date and prior to his self-employment income closing date (determined under paragraph (3))

by the number of months elapsing after such starting date and prior to his divisor closing date (determined under paragraph (3)) excluding from such elapsed months any month in any quarter prior to the quarter in which he attained the age of twenty-two which was not a quarter of coverage, except that when the number of such elapsed months thus computed is less than eighteen, it shall be increased to eighteen.

(2) An individual's "starting date" shall be December 31, 1950, or, if later, the day preceding the quarter in which he attained the age of twenty-two, whichever results in the higher average monthly wage.

(3)(A) Except to the extent provided in paragraph (D), an individual's "wage closing date" shall be the first day of the second quarter preceding the quarter in which he died or became entitled to old-age insurance benefits, whichever first occurred.

(B) Except to the extent provided in paragraph (D), an individual's "self-employment income closing date" shall be the day following the quarter in which ends his last taxable year (i) which ended before the month in which he died or became entitled to old-age insurance benefits, whichever first occurred, and (ii) during which he derived self-employment income.

(C) Except to the extent provided in paragraph (D), an individual's "divisor closing date" shall be the later of his wage closing date and his self-employment income closing date.

(D) In the case of an individual who died or became entitled to old-age insurance benefits after the first quarter in which he both was fully insured and had attained

## SUPERSEDED PROVISIONS—SOCIAL SECURITY ACT

42 P.L. 83-761 §215.

337 03/86

retirement age, the determination of his closing dates shall be made as though he became entitled to old-age insurance benefits in such first quarter, but only if it would result in a higher average monthly wage for such individual.

(4) Notwithstanding the preceding provisions of this subsection, in computing an individual's average monthly wage, there shall not be taken into account any self-employment income of such individual for taxable years ending in or after the month in which he died or became entitled to old-age insurance benefits, whichever first occurred.

## Determinations Made by Use of the Conversion Table

(c)(1) The amount referred to in paragraph (3) and clause (B) of paragraph (2) of subsection (a) for an individual shall be the amount appearing in column II of the following table on the line on which in column I appears his primary insurance benefit (determined as provided in subsection (d)); and his average monthly wage shall, for purposes of section 203(a), be the amount appearing on such line in column III.

I  If the primary insurance benefit (as determined under subsection (d)) is:—	II  The primary insurance amount shall be:	III  And the average monthly wage for purpose of computing maximum benefits shall be:
\$10.....	\$25.00	\$45.00
\$11.....	27.00	49.00
\$12.....	29.00	53.00
\$13.....	31.00	56.00
\$14.....	33.00	60.00
\$15.....	35.00	64.00
\$16.....	36.70	67.00
\$17.....	38.20	69.00
\$18.....	39.50	72.00
\$19.....	40.70	74.00
\$20.....	42.00	76.00
\$21.....	43.50	79.00
\$22.....	45.30	82.00
\$23.....	47.50	86.00
\$24.....	50.10	91.00
\$25.....	52.40	95.00
\$26.....	54.40	99.00
\$27.....	56.30	109.00
\$28.....	58.00	120.00
\$29.....	59.40	129.00
\$30.....	60.80	139.00
\$31.....	62.00	147.00
\$32.....	63.30	155.00
\$33.....	64.40	163.00
\$34.....	65.50	170.00
\$35.....	66.60	177.00
\$36.....	67.80	185.00
\$37.....	68.90	193.00
\$38.....	70.00	200.00
\$39.....	71.00	207.00
\$40.....	72.00	213.00
\$41.....	73.10	221.00
\$42.....	74.10	227.00
\$43.....	75.10	234.00
\$44.....	76.10	241.00
\$45.....	77.10	250.00
\$46.....	77.10	250.00

(2) In case the primary insurance benefit of an individual (determined as provided in subsection (d)) falls between the amounts on any two consecutive lines in column I of the table, the amount referred to in paragraphs (2)(B) and (3) of subsection (a) for such individual shall be the amount determined with respect to such benefit (under the applicable regulations in effect on May 1, 1952), increased by 12  $\frac{1}{2}$  per centum or \$5, whichever is the larger, and further increased, if it is not then a multiple of \$0.10, to the next higher multiple of \$0.10.



(3) For the purpose of facilitating the use of the conversion table in computing any insurance benefit under section 202, the Administrator is authorized to assume that the primary insurance benefit from which such benefit under section 202 is determined is one cent or two cents more or less than its actual amount.

(4) For purposes of section 203(a), the average monthly wage of an individual whose primary insurance amount is determined under paragraph (2) of this subsection shall be a sum equal to the average monthly wage which would result in such primary insurance amount upon application of the provisions of subsection (a)(1) of this section and without the application of subsection (e)(2) or (g) of this section; except that, if such sum is not a multiple of \$1, it shall be rounded to the nearest multiple of \$1.

**[SEC. 215. (d)] Primary Insurance Benefit for Purposes of Conversion Table**

(e)

(1) in computing an individual's average monthly wage there shall not be counted, in the case of any calendar year after 1950, the excess over \$3,600 of (A) the wages paid to him in such year, plus (B) the self-employment income credited to such year (as determined under section 212); \*

(f)

(2)(A) Upon application by an individual entitled to old-age insurance benefits, the Administrator shall recompute his primary insurance amount if application therefor is filed after the twelfth month for which deductions under paragraph (1) or (2) of section 203(b) have been imposed (within a period of thirty-six months) with respect to such benefit, not taking into account any month prior to September 1950 or prior to the earliest month for which the last previous computation of his primary insurance amount was effective, and if not less than six of the quarters elapsing after 1950 and prior to the quarter in which he filed such application are quarters of coverage.

(B) Upon application by an individual who, in or before the month of filing of such application, attained the age of 75 and who is entitled to old-age insurance benefits for which the primary insurance amount was computed under subsection (a)(3) of this section, the Administrator shall recompute his primary insurance amount if not less than six of the quarters elapsing after 1950 and prior to the quarter in which he filed application for such recomputation are quarters of coverage.

(C) A recomputation under subparagraphs (A) and (B) of this paragraph shall be made only as provided in subsection (a)(1) and shall take into account only such wages and self-employment income as would be taken into account under subsection (b) if the month in which application for recomputation is filed were deemed to be the month in which the individual became entitled to old-age insurance benefits. Such recomputation shall be effective for and after the month in which such application for recomputation is filed.

(3)(A) Upon application by an individual entitled to old-age insurance benefits, filed at least six months after the month in which he became so entitled, the Administrator shall recompute his primary insurance amount. Such recomputation shall be made in the manner provided in the preceding subsections of this section for computation of such amount except that his closing dates for purposes of subsection (b) shall be deemed to be the first day of the quarter in which he became entitled to old-age insurance benefits. Such recomputation shall be effective for and after the first month in which he became entitled to old-age insurance benefits.

(B) Upon application by a person entitled to monthly benefits on the basis of the wages and self-employment income of an individual who died after August 1950, the Administrator shall recompute such individual's primary insurance amount if such application is filed at least six months after the month in which such individual died or became entitled to old-age insurance benefits, whichever first occurred. Such recomputation shall be made in the manner provided in the preceding subsections of this section for computation of such amount except that his closing dates for purposes of subsection (b) shall be deemed to be the first day of the quarter in which he died or became entitled to old-age insurance benefits, whichever first occurred. Such recomputation shall be effective for and after the month in which such person who filed the application for recomputation became entitled to such monthly benefits. No recomputation under this paragraph shall affect the amount of the lump-sum death payment under subsection (i) of section 202 and no such recomputation shall render erroneous any such payment certified by the Administrator prior to the effective date of the recomputation.

(4) Upon the death after August 1950 of an individual entitled to old-age insurance benefits, if any person is entitled to monthly benefits, or to a lump-sum death payment, on the basis of the wages and self-employment income of such individual, the

\*P.L. 83-761, §102(e)(1), struck out "and" after the semicolon.

Administrator shall recompute the decedent's primary insurance amount, but (except as provided in paragraph (3)(B)) only if—

(A) the decedent would have been entitled to a recomputation under paragraph (2) if he had filed application therefor in the month in which he died; or

(B) the decedent during his lifetime was paid compensation which is treated, under section 205(o), as remuneration for employment.

If the recomputation is permitted by subparagraph (A), the recomputation shall be made (if at all) as though he had filed application for a recomputation under paragraph (2) in the month in which he died, except that such recomputation shall include any compensation (described in section 205(o)) paid to him prior to the divisor closing date which would have been applicable under such paragraph. If recomputation is permitted by subparagraph (B), the recomputation shall take into account only the wages and self-employment income which were taken into account in the last previous computation of his primary insurance amount and the compensation (described in section 205(o)) paid to him prior to the divisor closing date applicable to such computation. If both of the preceding sentences are applicable to an individual, only the recomputation which results in the larger primary insurance amount shall be made.

#### SEC. 218.

(c)

(3) Such agreement shall, if the State requests it, exclude (in the case of any coverage group) any services of an emergency nature or all services in any class or classes of elective positions, part-time positions, or positions the compensation for which is on a fee basis.

#### Effective Date of Agreement

(f) Any agreement or modification of an agreement under this section shall be effective with respect to services performed after an effective date specified in such agreement or modification, but in no case prior to January 1, 1951, and in no case (other than in the case of an agreement or modification agreed to prior to January 1, 1954) prior to the first day of the calendar year in which such agreement or modification, as the case may be, is agreed to by the Administrator and the State.

#### Provisions of the Social Security Act as in Effect Prior to P.L. 84-880, Approved August 1, 1956 (70 State 807) Social Security Amendments of 1956

SEC. 3. (a) From the sums appropriated therefor, the Secretary of the Treasury shall pay to each State which has an approved plan for old-age assistance, for each quarter, beginning with the quarter commencing October 1, 1952, (1) in the case of any State other than Puerto Rico and the Virgin Islands, an amount<sup>1</sup> equal to the sum of the following proportions of the total amounts expended during such quarter as old-age assistance in the form of money payments<sup>2</sup> under the State plan, not counting so much of such expenditure with respect to any individual for any month as exceeds \$55—

(A) four-fifths of such expenditures, not counting so much of any expenditure with respect to any month as exceeds the product of \$25 multiplied by the total number of such individuals who received old-age assistance in the form of money payments<sup>3</sup> for such month; plus

(B) one-half of the amount by which such expenditures exceed the maximum which may be counted under clause (A);

and (2) in the case of Puerto Rico and the Virgin Islands, an amount<sup>4</sup> equal to one-half of the total of the sums expended during such quarter as old-age assistance in the form of money payments<sup>5</sup> under the State plan, not counting so much of such expenditure with respect to any individual for any month as exceeds \$30, and (3) in the case of any State, an amount equal to one-half of the total of the sums expended during such quarter as found necessary by the Administrator for the proper and efficient administration of the State plan, including services which are provided by the staff of the State agency (or of the local agency administering the State plan in the political subdivision) to applicants for and recipients of old-age assistance to help them attain

<sup>1</sup>P.L. 84-880, §311(c)(1), struck out “, which shall be used exclusively as old-age assistance,”.

<sup>2</sup>P.L. 84-880, §301(a), inserted “in the form of money payments”.

<sup>3</sup>P.L. 84-880, §301(b), inserted “in the form of money payments”.

<sup>4</sup>See footnote 1.

<sup>5</sup>See footnote 2.



self-care<sup>6</sup>, and (4) in the case of any State, an amount equal to one-half of the total of the sums expended during such quarter as old-age assistance under the State plan in the form of medical or any other type of remedial care (including expenditures for insurance premiums for such care or the cost thereof), not counting so much of such expenditure for any month as exceeds the product of \$6 multiplied by the total number of individuals who received old-age assistance under the State plan for such month<sup>7</sup>.

## TITLE II—FEDERAL OLD-AGE AND SURVIVORS INSURANCE BENEFITS

### FEDERAL OLD-AGE AND SURVIVORS INSURANCE TRUST FUND

SEC. 201. (a) There is hereby created on the books of the Treasury of the United States a trust fund to be known as the "Federal Old Age and Survivors Insurance Trust Fund" (hereinafter in this title called the "Trust Fund"). The Trust Fund shall consist of the securities held by the Secretary of the Treasury for the Old Age Reserve Account and the amount standing to the credit of the Old Age Reserve Account on the books of the Treasury on January 1, 1940, which securities and amount the Secretary of the Treasury is authorized and directed to transfer to the Trust Fund, and, in addition, such amounts as may be appropriated to, or deposited in, the Trust Fund as hereinafter provided. There is hereby appropriated to the Trust Fund for the fiscal year ending June 30, 1941, and for each fiscal year thereafter, out of any moneys in the Treasury not otherwise appropriated, amounts equivalent to 100 per centum of—

(1) the taxes (including interest, penalties, and additions to the taxes) received under subchapter A of chapter 9 of the Internal Revenue Code (and covered into the Treasury) which are deposited into the Treasury by collectors of internal revenue before January 1, 1951; and

(2) the taxes certified each month by the Commissioner of Internal Revenue as taxes received under subchapter A of chapter 9 of such code which are deposited into the Treasury by collectors of internal revenue after December 31, 1950, and before January 1, 1953, with respect to assessments of such taxes made before January 1, 1951; and

(3) the taxes imposed by subchapter A of chapter 9 of such code with respect to wages (as defined in section 1426 of such code) reported to the Commissioner of Internal Revenue pursuant to section 1420(c) of such code after December 31, 1950, as determined by the Secretary of the Treasury by applying the applicable rates of tax under such subchapter to such wages, which wages shall be certified by the Federal Security Administrator on the basis of the records of wages established and maintained by such Administrator in accordance with such reports; and

(4) the taxes imposed by subchapter E of chapter 1 of such code with respect to self-employment income (as defined in section 481 of such code) reported to the Commissioner of Internal Revenue on tax returns under such subchapter, as determined by the Secretary of the Treasury by applying the applicable rate of tax under such subchapter to such self-employment income, which self-employment income shall be certified by the Federal Security Administrator on the basis of the records of self-employment income established and maintained by the Administrator in accordance with such returns.

The amounts appropriated by clauses (3) and (4) shall be transferred from time to time from the general fund in the Treasury to the Trust Fund on the basis of estimates by the Secretary of the Treasury of the taxes, referred to in clauses (3) and (4), paid to or deposited into the Treasury; and proper adjustments shall be made in amounts subsequently transferred to the extent prior estimates were in excess of or were less than the amounts of the taxes referred to in such clauses.

(b) There is hereby created a body to be known as the Board of Trustees of the Federal Old-Age and Survivors Insurance Trust Fund (hereinafter in this title called the "Board of Trustees") which Board of Trustees shall be composed of the Secretary of the Treasury, the Secretary of Labor, and the Federal Security Administrator, all ex officio. The Secretary of the Treasury shall be the Managing Trustee of the Board of Trustees (hereinafter in this title called the "Managing Trustee"). The Commissioner for Social Security shall serve as Secretary of the Board of Trustees. It shall be the duty of the Board of Trustees to—

(1) Hold the Trust Fund;

<sup>6</sup>P.L. 84-880, §311(c)(2), struck out "which amount shall be used for paying the costs of administering the State plan or for old-age assistance, or both, and for no other purpose" and substituted "including services which are provided by the staff of the State agency (or of the local agency administering the State plan in the political subdivision) to applicants for and recipients of old-age assistance to help them attain self-care".

<sup>7</sup>P.L. 84-880, §301(c), inserted clause (4).



(2) Report to the Congress not later than the first day of March of each year on the operation and status of the Trust Fund during the preceding fiscal year and on its expected operation and status during the next ensuing five fiscal years;

(3) Report immediately to the Congress whenever the Board of Trustees is of the opinion that during the ensuing five fiscal years the Trust Fund will exceed three times the highest annual expenditures anticipated during that five-fiscal-year period, and whenever the Board of Trustees is of the opinion that the amount of the Trust Fund is unduly small; and

(4) Recommend improvements in administrative procedures and policies designed to effectuate the proper coordination of the old-age and survivors insurance and Federal-State unemployment compensation programs.

The report provided for in paragraph (2) above shall include a statement of the assets of, and the disbursements made from, the Trust Fund during the preceding fiscal year, an estimate of the expected future income to, and disbursements to be made from, the Trust Fund during each of the next ensuing five fiscal years, and a statement of the actuarial status of the Trust Fund. Such report shall be printed as a House document of the session of the Congress to which the report is made.

(c) It shall be the duty of the Managing Trustee to invest such portion of the Trust Fund as is not, in his judgment, required to meet current withdrawals. Such investments may be made only in interest-bearing obligations of the United States or in obligations guaranteed as to both principal and interest by the United States. For such purpose such obligations may be acquired (1) on original issue at par, or (2) by purchase of outstanding obligations at the market price. The purposes for which obligations of the United States may be issued under the Second Liberty Bond Act, as amended, are hereby extended to authorize the issuance at par of special obligations exclusively to the Trust Fund. Such special obligations shall bear interest at a rate equal to the average rate of interest, computed as to the end of the calendar month next preceding the date of such issue, borne by all interest-bearing obligations of the United States then forming a part of the Public Debt; except that where such average rate is not a multiple of one-eighth of 1 per centum, the rate of interest of such special obligations shall be the multiple of one-eighth of 1 per centum next lower than such average rate. Such special obligations shall be issued only if the Managing Trustee determines that the purchase of other interest-bearing obligations of the United States, or of obligations guaranteed as to both principal and interest by the United States on original issue or at the market price, is not in the public interest.

(d) Any obligations acquired by the Trust Fund (except special obligations issued exclusively to the Trust Fund) may be sold by the Managing Trustee at the market price, and such special obligations may be redeemed at par plus accrued interest.

(e) The interest on, and the proceeds from the sale or redemption of, any obligations held in the Trust Fund shall be credited to and form a part of the Trust Fund.

(f)(1) The managing Trustee is directed to pay from the Trust Fund into the Treasury the amount estimated by him and the Federal Security Administrator which will be expended during a three-month period by the Federal Security Agency and the Treasury Department for the administration of titles II and VIII of this Act and subchapter E of chapter 1 and subchapter A of chapter 9 of the Internal Revenue Code. Such payments shall be covered into the Treasury as repayments to the account for reimbursement of expenses incurred in connection with the administration of titles II and VIII of this Act and subchapter E of chapter 1 and subchapter A of chapter 9 of the Internal Revenue Code.

(2) The Managing Trustee is directed to pay from time to time from the Trust Fund into the Treasury the amount estimated by him as taxes which are subject to refund under section 1401(d) of the Internal Revenue Code with respect to wages (as defined in section 1426 of such code) paid after December 31, 1950. Such taxes shall be determined on the basis of the records of wages established and maintained by the Federal Security Administrator in accordance with the wages reported to the Commissioner of Internal Revenue pursuant to section 1420(c) of such code, and the Administrator shall furnish the Managing Trustee such information as may be required by the Trustee for such purpose. The payments by the Managing Trustee shall be covered into the Treasury as repayments to the account for refunding internal revenue collections.

(3) Repayments made under paragraph (1) or (2) shall not be available for expenditures but shall be carried to the surplus fund of the Treasury. If it subsequently appears that the estimates under either such paragraph in any particular period were too high or too low, appropriate adjustments shall be made by the Managing Trustee in future payments.

(g) All amounts credited to the Trust Fund shall be available for making payments required under this title.

## SEC. 202. (a)

(3) has filed application for old-age insurance benefits,

(b)(1)

(D) is not entitled to old-age insurance benefits, or is entitled to old-age insurance benefits each of which is less than one-half of an old-age insurance benefit of her husband,

(d)(1) Every child (as defined in section 216(e)) of an individual entitled to old-age insurance benefits, or of an individual who died a fully or currently insured individual after 1939, if such child—

(A) has filed application for child's insurance benefits,

(B) at the time such application was filed was unmarried and had not attained the age of eighteen, and

(C) was dependent upon such individual at the time such application was filed, or, if such individual has died, was dependent upon such individual at the time of such individual's death,

shall be entitled to a child's insurance benefit for each month, beginning with the first month after August 1950 in which such child becomes so entitled to such insurance benefits and ending with the month preceding the first month in which any of the following occurs: such child dies, marries, is adopted (except for adoption by a stepparent, grandparent, aunt, or uncle subsequent to the death of such fully or currently insured individual), or attains the age of eighteen.

(k)

(3) If an individual is entitled to an old-age insurance benefit for any month and to any other monthly insurance benefit for such month, such other insurance benefit for such month shall be reduced (after any reduction under section 203(a)) by an amount equal to such old-age insurance benefit.

## SEC. 203.

(b)

(3) in which such individual, if a wife under retirement age entitled to a wife's insurance benefit, did not have in her care (individually or jointly with her husband) a child of her husband entitled to a child's insurance benefit; or

## Circumstances Under Which Deductions Not Required

(h) Deductions by reason of subsection (b), (f), or (g) shall, notwithstanding the provisions of such subsection, be made from the benefits to which an individual is entitled only to the extent that they reduce the total amount which would otherwise be paid, on the basis of the same wages and self-employment income, to him and the other individuals living in the same household.

## SEC. 209.

(h)

(2) Cash remuneration paid by an employer in any calendar year to an employee for agricultural labor, if the cash remuneration paid in such year by the employer to the employee for such labor is less than \$100;

## SEC. 210.

(a)

(1)

(B) Service performed by foreign agricultural workers (i) under contracts entered into in accordance with title V of the Agricultural Act of 1949, as amended, or (ii) lawfully admitted to the United States from the Bahamas, Jamaica, and the other British West Indies on a temporary basis to perform agricultural labor;

(6)

(C)

(vi) by any individual to whom the Civil Service Retirement Act of 1930 does not apply because such individual is subject to another retirement system;

## SEC. 211.

(a)

(7)

(B) a citizen of the United States performing service described in subsection (c)(4) as an employee of an American employer (as defined in section 210(e))

(c)

(2) The performance of service by an individual as an employee (other than service described in section 210(a)(16)(B) performed by an individual who has attained the age of eighteen and other than service described in paragraph (4) of this subsection);



(5) The performance of service by an individual in the exercise of his profession as a physician, lawyer, dentist, osteopath, veterinarian, chiropractor, naturopath, optometrist, or Christian Science practitioner; or the performance of such service by a partnership.

## SEC. 214.

(a)

(3) In the case of any individual who did not die prior to January 1, 1955, the term "fully insured individual" means any individual who meets the requirements of paragraph (2) and, in addition, any individual with respect to whom all of the quarters elapsing after 1954 and prior to (i) July 1, 1956, or (ii) if later, the quarter in which he attained retirement age or died, whichever first occurred, are quarters, but only if there are not fewer than six of such quarters so elapsing.

## SEC. 215.

(b)(1) An individual's "average monthly wage" shall be the quotient obtained by dividing the total of his wages and self-employment income after his starting date (determined under paragraph (2)) and prior to his closing date (determined under paragraph (3)), by the number of months elapsing after such starting date and prior to such closing date, excluding from such elapsed months any month in any year prior to the year in which he attained the age of twenty-two if less than two quarters of such prior year were quarters of coverage and any month in any quarter any part of which was included in a period of disability (as defined in section 216(i)) unless such quarter was a quarter of coverage, except that when the number of such elapsed months thus computed (including a computation after the application of paragraph (4)) is less than eighteen, it shall be increased to eighteen.

(e)

(4) in computing an individual's average monthly wage, there shall not be taken into account (A) any wages paid such individual in any quarter any part of which was included in a period of disability unless such quarter was a quarter of coverage, or (B) any self-employment income of such individual for any taxable year all of which was included in a period of disability.

## SEC. 216.

## Retirement Age

(a) The term "retirement age" means age sixty-five.

## SEC. 218.

(h)(1) All amounts received by the Secretary of the Treasury under an agreement made pursuant to this section shall be deposited in the Trust Fund.

## Failure To Make Payments

(j) In case any State does not make, at the time or times due, the payments provided for under an agreement pursuant to this section, there shall be added, as part of the amounts due, interest at the rate of 6 per centum per annum from the date due until paid, and the Administrator may, in his discretion, deduct such amounts plus interest from any amounts certified by him to the Secretary of the Treasury for payment to such State under any other provision of this Act. Amounts so deducted shall be deemed to have been paid to the State under such other provision of this Act. Amounts equal to the amounts deducted under this subsection are hereby appropriated to the Trust Fund.

## SEC. 221.

(e) Each State which has an agreement with the Secretary under this section shall be entitled to receive from the Trust Fund, in advance or by way of reimbursement, as may be mutually agreed upon, the cost to the State of carrying out the agreement under this section. The Secretary shall from time to time certify such amount as is necessary for this purpose to the Managing Trustee, reduced or increased, as the case may be, by any sum (for which adjustment hereunder has not previously been made) by which the amount certified for any prior period was greater or less than the amount which should have been paid to the State under this subsection for such period; and the Managing Trustee, prior to audit or settlement by the General Accounting Office, shall make payment from the Trust Fund at the time or times fixed by the Secretary, in accordance with such certification.

(f) All money paid to a State under this section shall be used solely for the purposes for which it is paid; and any money so paid which is not used for such purposes shall be returned to the Treasury of the United States for deposit in the Trust Fund.



## REFERRAL FOR REHABILITATION SERVICES

SEC. 222. It is hereby declared to be the policy of the Congress in enacting the preceding section that disabled individuals applying for a determination of disability shall be promptly referred to the State agency or agencies administering or supervising the administration of the State plan approved under the Vocational Rehabilitation Act for necessary vocational rehabilitation services, to the end that the maximum number of disabled individuals may be restored to productive activity.

SEC. 403. (a) From the sums appropriated therefor, the Secretary of the Treasury shall pay to each State which has an approved plan for aid to dependent children, for each quarter, beginning with the quarter commencing October 1, 1952, (1) in the case of any State other than Puerto Rico and the Virgin Islands, an amount<sup>8</sup> equal to the sum of the following proportions of the total amounts expended during such quarter as aid to dependent children in the form of money payments<sup>9</sup> under the State plan, not counting so much of such expenditure with respect to any dependent child for any month as exceeds \$30, or if there is more than one dependent child in the same home, as exceeds \$30 with respect to one such dependent child and \$21 with respect to each of the other dependent children, and not counting so much of such expenditure for any month with respect to a relative with whom any dependent child is living as exceeds \$30—

(A) four-fifths of such expenditures, not counting so much of the expenditures with respect to any month as exceeds the product of \$15 multiplied by the total number of dependent children and other individuals with respect to whom aid to dependent children in the form of money payments<sup>10</sup> is paid for such month, plus

(B) one-half of the amount by which such expenditures exceed the maximum which may be counted under clause (A);

and (2) in the case of Puerto Rico and the Virgin Islands, an amount<sup>11</sup> equal to one-half of the total of the sums expended during such quarter as aid to dependent children in the form of money payments<sup>12</sup> under the State plan, not counting so much of such expenditure with respect to any dependent child for any month as exceeds \$18, or if there is more than one dependent child in the same home, as exceeds \$18 with respect to one such dependent child and \$12 with respect to each of the other dependent children, and not counting so much of such expenditure for any month with respect to a relative with whom any dependent child is living as exceeds \$18<sup>13</sup>; and (3) in the case of any State, an amount equal to one-half of the total of the sums expended during such quarter as found necessary by the Administrator for the proper and efficient administration of the State plan, including services which are provided by the staff of the State agency (or of the local agency administering the State plan in the political subdivision), to relatives with whom such children (applying for or receiving such aid) are living, in order to help such relatives attain self-support or self-care, or which are provided to maintain and strengthen family life for such children<sup>14</sup>; and (4) in the case of any State, an amount equal to one-half of the total of the sums expended during such quarter as aid to dependent children under the State plan in the form of medical or any other type of remedial care (including expenditures for insurance premiums for such care or the cost thereof), not counting so much of such expenditure for any month as exceeds (A) the product of \$3 multiplied by the total number of dependent children who received aid to dependent children under the State plan for such month plus (B) the product of \$6 multiplied by the total number of other individuals who received aid to dependent children under the State plan for such month<sup>15</sup>.

SEC. 1003. (a) From the sums appropriated therefor, the Secretary of the Treasury shall pay to each State which has an approved plan for aid to the blind, for each quarter, beginning with the quarter commencing October 1, 1952, (1) in the case of any State other than Puerto Rico and the Virgin Islands, an amount<sup>16</sup> equal to the sum of the following proportions of the total amounts expended during such quarter as aid to the blind in the form of money payments<sup>17</sup> under the State plan, not counting so much

<sup>8</sup>P.L. 84-880, §312(c)(1), struck out “, which shall be used exclusively as aid to dependent children.”.

<sup>9</sup>P.L. 84-880, §302(a), inserted “in the form of money payments”.

<sup>10</sup>P.L. 84-880, §302(b), inserted “in the form of money payments”.

<sup>11</sup>See footnote 8.

<sup>12</sup>See footnote 9.

<sup>13</sup>P.L. 84-880, §351(a), inserted “, and not counting so much of such expenditure for any month with respect to a relative with whom any dependent child is living as exceeds \$18”.

<sup>14</sup>P.L. 84-880, §312(c)(2), struck out “which amount shall be used for paying the costs of administering the State plan or for aid to dependent children, or both, and for no other purpose” and substituted “including services which are provided by the staff of the State agency (or of the local agency administering the State plan in the political subdivision), to relatives with whom such children (applying for or receiving such aid) are living, in order to help such relatives attain self-support or self-care, or which are provided to maintain and strengthen family life for such children”.

<sup>15</sup>P.L. 84-880, §302(c), added clause (4).

<sup>16</sup>P.L. 84-880, §313(c)(1), struck out “, which shall be used exclusively as aid to the blind.”.

<sup>17</sup>P.L. 84-880, §303(a), inserted “in the form of money payments”.

of such expenditure with respect to any individual for any month as exceeds \$55—

(A) four-fifths of such expenditures, not counting so much of any expenditure with respect to any month as exceeds the product of \$25 multiplied by the total number of such individuals who received aid to the blind in the form of money payments<sup>18</sup> for such month, plus

(B) one-half of the amount by which such expenditures exceed the maximum which may be counted under clause (A);

and (2) in the case of Puerto Rico and the Virgin Islands, an amount<sup>19</sup> equal to one-half of the total of the sums expended during such quarter as aid to the blind in the form of money payments<sup>20</sup> under the State plan, not counting so much of such expenditure with respect to any individual for any month as exceeds \$30; and (3) in the case of any State, an amount equal to one-half of the total of the sums expended during such quarter as found necessary by the Administrator for the proper and efficient administration of the State plan, including services which are provided by the staff of the State agency (or of the local agency administering the State plan in the political subdivision) to applicants for and recipients of aid to the blind to help them attain self-support or self-care<sup>21</sup>; and (4) in the case of any State, an amount equal to one-half of the total of the sums expended during such quarter as aid to the blind under the State plan in the form of medical or any other type of remedial care (including expenditures for insurance premiums for such care or the cost thereof), not counting so much of such expenditure for any month as exceeds the product of \$6 multiplied by the total number of individuals who received aid to the blind under the State plan for such month<sup>22</sup>.

Sec. 1403. (a) From the sums appropriated therefor, the Secretary of the Treasury shall pay to each State which has an approved plan for aid to the permanently and totally disabled, for each quarter, beginning with the quarter commencing October 1, 1952, (1) in the case of any State other than Puerto Rico and the Virgin Islands, an amount<sup>23</sup> equal to the sum of the following proportions of the total amounts expended during such quarter as aid to the permanently and totally disabled in the form of money payments<sup>24</sup> under the State plan, not counting so much of such expenditure with respect to any individual for any month as exceeds \$55—

(A) four-fifths of such expenditures, not counting so much of any expenditure with respect to any month as exceeds the product of \$25 multiplied by the total number of such individuals who received aid to the permanently and totally disabled in the form of money payments<sup>25</sup> for such month, plus

(B) one-half of the amount by which such expenditures exceed the maximum which may be counted under clause (A);

and (2) in the case of Puerto Rico and the Virgin Islands, an amount<sup>26</sup> equal to one-half of the total of the sums expended during such quarter as aid to the permanently and totally disabled in the form of money payments<sup>27</sup> under the State plan, not counting so much of such expenditure with respect to any individual for any month as exceeds \$30; and (3) in the case of any State, an amount equal to one-half of the total of the sums expended during such quarter as found necessary by the Administrator for the proper and efficient administration of the State plan, including services which are provided by the staff of the State agency (or of the local agency administering the State plan in the political subdivision) to applicants for and recipients of such aid to help them attain self-support or self-care<sup>28</sup>; and (4) in the case of any State, an amount equal to one-half of the total of the sums expended during such quarter as aid to the permanently and totally disabled under the State plan in the form of medical or any other type of remedial care (including expenditures for insurance premiums for such care or the cost thereof), not counting so much of such expenditure for any month as exceeds the product of \$6 multiplied by the total number of individuals who received aid to the permanently and totally disabled under the State plan for such month<sup>29</sup>.

<sup>18</sup>P.L. 84-880, §303(b), inserted "in the form of money payments".

<sup>19</sup>See footnote 16.

<sup>20</sup>See footnote 17.

<sup>21</sup>P.L. 84-880, §313(c)(2), struck out "which amount shall be used for paying the costs of administering the State plan or for aid to the blind, or both, and for no other purpose" and substituting "including services which are provided by the staff of the State agency (or of the local agency administering the State plan in the political subdivision) to applicants for and recipients of aid to the blind to help them attain self-support or self-care".

<sup>22</sup>P.L. 84-880, §303(c), added paragraph (4).

<sup>23</sup>P.L. 84-880, §314(c)(1) struck out "which shall be used exclusively as aid to the permanently and totally disabled."

<sup>24</sup>P.L. 84-880, §304(a), inserted "in the form of money payments".

<sup>25</sup>P.L. 84-880, §304(b), inserted "in the form of money payments".

<sup>26</sup>See footnote 23.

<sup>27</sup>See footnote 24.

<sup>28</sup>P.L. 84-880, §314(c)(2), struck out "which amount shall be used for paying the costs of administering the State plan or for aid to the permanently and totally disabled, or both, and for no other purpose" and substituted "including services which are provided by the staff of the State agency (or of the local agency administering the State plan in the political subdivision) to applicants for and recipients of such aid to help them attain self-support or self-care".

<sup>29</sup>P.L. 84-880, §304(c), added paragraph (4).



**Provisions of the Social Security Act as in Effect Prior to  
P.L. 84-881, Approved August 1, 1956 (70 Stat. 857)  
Servicemen's and Veterans' Survivor Benefits Act**

**SEC. 217.**

(e)(1) For purposes of determining entitlement to and the amount of any monthly benefit or lump-sum death payment payable under this title on the basis of the wages and self-employment income of any veteran (as defined in paragraph (4)), and for purposes of section 216(i)(3), such veteran shall be deemed to have been paid wages (in addition to the wages, if any, actually paid to him) of \$160 in each month during any part of which he served in the active military or naval service of the United States on or after July 25, 1947, and prior to April 1, 1956. This subsection shall not be applicable in the case of any monthly benefit or lump-sum death payment if—

(A) a larger such benefit or payment, as the case may be, would be payable without its application; or

(B) a benefit (other than a benefit payable in a lump sum unless it is a commutation of, or a substitute for, periodic payments) which is based, in whole or in part, upon the active military or naval service of such veteran on or after July 25, 1947, and prior to April 1, 1956, is determined by any agency or wholly owned instrumentality of the United States (other than the Veterans' Administration) to be payable by it under any other law of the United States or under a system established by such agency or instrumentality.

The provisions of clause (B) shall not apply in the case of any monthly benefit or lump-sum death payment under this title if its application would reduce by \$0.50 or less the primary insurance amount (as computed under section 215 prior to any recomputation thereof pursuant to subsection (f) of such section) of the individual on whose wages and self-employment income such benefit or payment is based. The provisions of clause (B) shall also not apply for purposes of section 216(i)(3).

(2) Upon application for benefits or a lump-sum death payment on the basis of the wages and self-employment income of any veteran, the Federal Security Administrator shall make a decision without regard to clause (B) of paragraph (1) of this subsection unless he has been notified by some other agency or instrumentality of the United States that, on the basis of the military or naval service of such veteran on or after July 25, 1947, and prior to April 1, 1956, a benefit described in clause (B) of paragraph (1) has been determined by such agency or instrumentality to be payable by it. If he has not been so notified, the Federal Security Administrator shall then ascertain whether some other agency or wholly owned instrumentality of the United States has decided that a benefit described in clause (B) of paragraph (1) is payable by it. If any such agency or instrumentality has decided, or thereafter decides, that such a benefit is payable by it, it shall so notify the Federal Security Administrator, and the Administrator shall certify no further benefits for payment or shall recompute the amount of any further benefits payable, as may be required by paragraph (1) of this subsection.

(3) Any agency or wholly owned instrumentality of the United States which is authorized by any law of the United States to pay benefits, or has a system of benefits which are based, in whole or in part, on military or naval service on or after July 25, 1947, and prior to April 1, 1956, shall, at the request of the Federal Security Administrator, certify to him, with respect to any veteran, such information as the Administrator deems necessary to carry out his functions under paragraph (2) of this subsection.

(4) For the purposes of this subsection, the term "veteran" means any individual who served in the active military or naval service of the United States at any time on or after July 25, 1947, and prior to April 1, 1956, and who, if discharged or released therefrom, was so discharged or released under conditions other than dishonorable after active service of ninety days or more or by reason of a disability or injury incurred or aggravated in service in line of duty; but such term shall not include any individual who died while in the active military or naval service of the United States if his death was inflicted (other than by an enemy of the United States) as lawful punishment for a military or naval offense.



**Provisions of the Social Security Act as in Effect Prior to  
P.L. 85-238, Approved August 30, 1957 (71 Stat. 518)  
[Social Security Act—Title II Amendments 1957]**

## SEC. 202.

(b)(1)

(C) was living with such individual at the time such application was filed, and

(c)(1)

(C) was living with such individual at the time such application was filed,

(e)(1)

(D) was living with such individual at the time of his death, and

(f)(1)

(D) was living with such individual at the time of her death,

(g)(1)

(F)(i) in the case of a widow, was living with such individual at the time of his death, or (ii) in the case of a former wife divorced, was receiving from such individual (pursuant to agreement or court order) at least one-half of her support at the time of his death, and the child referred to in clause (E) is her son, daughter, or legally adopted child and the benefits referred to in such clause are payable on the basis of such individual's wages and self-employment income,

## SEC. 216.

**Determination of Family Status**

(h)(1) In determining whether an applicant is the wife, husband, widow, widower, child, or parent of a fully insured or currently insured individual for purposes of this title, the Administrator shall apply such law as would be applied in determining the devolution of intestate personal property by the courts of the State in which such insured individual is domiciled at the time such applicant files application, or, if such insured individual is dead, by the courts of the State in which he was domiciled at the time of his death, or if such insured individual is or was not so domiciled in any State, by the courts of the District of Columbia. Applicants who according to such law would have the same status relative to taking intestate personal property as a wife, husband, widow, widower, child, or parent shall be deemed such.

(2) A wife shall be deemed to be living with her husband if they are both members of the same household, or she is receiving regular contributions from him toward her support, or he has been ordered by any court to contribute to her support; and a widow shall be deemed to have been living with her husband at the time of his death if they were both members of the same household on the date of his death, or she was receiving regular contributions from him toward her support on such date, or he had been ordered by any court to contribute to her support.

(3) A husband shall be deemed to be living with his wife if they are both members of the same household, or he is receiving regular contributions from her toward his support, or she has been ordered by any court to contribute to his support; and a widower shall be deemed to have been living with his wife at the time of her death if they were both members of the same household on the date of her death, or he was receiving regular contributions from her toward his support on such date, or she had been ordered by any court to contribute to his support.

**Provision of the Social Security Act as in Effect Prior to  
P.L. 85-239, Approved August 30, 1957 (71 Stat. 521)  
[Internal Revenue—SEI—Ministers]**

## SEC. 211.

(a)

(7) An individual who is—

(A) a duly ordained, commissioned, or licensed minister of a church or a member of a religious order; and

(B) a citizen of the United States performing service described in subsection (c)(4) as an employee of an American employer (as defined in section 210(e)) or as a minister in a foreign country who has a congregation which is composed predominantly of citizens of the United States,

shall compute his net earnings from self-employment derived from the performance of service described in subsection (c)(4) without regard to section 911 (relating to earned income from sources without the United States) and section 931 (relating to income from sources within possessions of the United States) of the Internal Revenue Code of 1954.

**Provisions of the Social Security Act as in Effect Prior to  
P.L. 85-840, Approved August 28, 1958 (72 Stat. 1013)  
Social Security Amendments of 1958**

SEC. 3. (a) From the sums appropriated therefor, the Secretary of the Treasury shall pay to each State which has an approved plan for old-age assistance, for each quarter, beginning with the quarter commencing October 1, 1956, (1) in the case of any State other than Puerto Rico and the Virgin Islands, an amount equal to the sum of the following proportions of the total amounts expended during such quarter as old-age assistance under the State plan, not counting so much of such expenditure with respect to any individual for any month as exceeds \$60—

(A) four-fifths of such expenditures, not counting so much of any expenditure with respect to any month as exceeds the product of \$30 multiplied by the total number of such individuals who received old-age assistance for such month; plus

(B) one-half of the amount by which such expenditures exceed the maximum which may be counted under clause (A);

and (2) in the case of Puerto Rico and the Virgin Islands, an amount, which shall be used exclusively as old-age assistance, equal to one-half of the total of the sums expended during such quarter as old-age assistance under the State plan, not counting so much of such expenditure with respect to any individual for any month as exceeds \$30, and (3) in the case of any State, an amount equal to one-half of the total of the sums expended during such quarter as found necessary by the Secretary of Health, Education, and Welfare for the proper and efficient administration of the State plan, including services which are provided by the staff of the State agency (or of the local agency administering the State plan in the political subdivision) to applicants for and recipients of old-age assistance to help them attain self-care.

SEC. 202.

(c)(1)

(C) was receiving at least one-half of his support, as determined in accordance with regulations prescribed by the Administrator, from such individual at the time she became entitled to old-age insurance benefits and filed proof of such support within two years after the month in which she became so entitled, and

(d)(1) Every child (as defined in section 216(e)) of an individual entitled to old-age insurance benefits, or of an individual who died a fully or currently insured individual after 1939, if such child—

(A) has filed application for child's insurance benefits,

(B) at the time such application was filed was unmarried and either (i) had not attained the age of eighteen, or (ii) was under a disability (as defined in section 223(c)<sup>1</sup> which began before he attained the age of eighteen, and

(C) was dependent upon such individual at the time such application was filed, or, if such individual has died, was dependent upon such individual at the time of such individual's death,

shall be entitled to a child's insurance benefit for each month, beginning with the first month after August 1950 in which such child becomes so entitled to such insurance benefits and ending with the month preceding the first month in which any of the following occurs: such child dies, marries, is adopted (except for adoption by a stepparent, grandparent, aunt, or uncle subsequent to the death of such fully or currently insured individual), attains the age of eighteen and is not under a disability (as defined in section 223(c)) which began before he attained such age, or ceases to be under a disability (as so defined) on or after the day on which he attains age eighteen.

(6) A child who has attained the age of eighteen and who is under a disability (as defined in section 223(c)) which began before he attained the age of eighteen shall be deemed dependent upon his natural or adopting father, his natural or adopting mother, his stepfather, or his stepmother at the time specified in paragraph (1)(C) if the child—

(A) was or would, upon filing an application therefor, have been entitled to a child's insurance benefit on the basis of the wages and self-employment income of

<sup>1</sup>As in original. Should have a closing parenthesis.



such father, mother, stepfather, or stepmother for any month before the month in which he attained the age of eighteen, or

(B) was, at the time specified in paragraph (1)(C), receiving at least one-half of his support from such father, mother, stepfather, or stepmother.

(f)(1)

(D) (i) was receiving at least one-half of his support, as determined in accordance with regulations prescribed by the Administrator, from such individual at the time of her death and filed proof of such support within two years of such date of death, or (ii) was receiving at least one-half of his support, as determined in accordance with regulations prescribed by the Administrator, from such individual, and she was a currently insured individual, at the time she became entitled to old-age insurance benefits and filed proof of such support within two years after the month in which she became so entitled, and

(g)

(3) In the case of any widow or former wife divorced of an individual—

(A) who marries another individual, and

(B) whose marriage to the individual referred to in subparagraph (A) is terminated by his death but she is not his widow as defined in section 216(c), the marriage to the individual referred to in clause (A) shall, for the purpose of paragraph (1), be deemed not to have occurred. No benefits shall be payable under this subsection by reason of the preceding sentence for any month prior to whichever of the following is the latest: (i) the month in which the death referred to in subparagraph (B) of the preceding sentence occurs, (ii) the twelfth month before the month in which such widow or former wife divorced files application for purposes of this paragraph, or (iii) the month following the month in which this paragraph is enacted.

(h)(1) Every parent (as defined in this subsection) of an individual who died a fully insured individual after 1939, if such individual who died a fully insured individual after 1939, if such individual did not leave a widow who meets the conditions in subsection (e)(1)(D), a widower who meets the conditions in subsection (f)(1)(D) and (E), an unmarried child under the age of eighteen deemed dependent on such individual under subsection (d)(3), (4), or (5), or an unmarried child who has attained the age of eighteen and is under a disability (as defined in section 223(c)) which began before he attained such age and who is deemed dependent on such individual under subsection (d)(6), and if such parent—

(B) was receiving at least one-half of his support from such individual at the time of such individual's death and filed proof of such support within two years of such date of death,

(q)

(5)

(B) the number equal to the number of months for which the wife's insurance benefit was reduced under such paragraph (2), but for which such benefit was subject to deductions under paragraph (1) or (2) of section 203(b) or under section 203(c), and

(6)

(A) the number equal to the number of months for which such benefit was reduced under such paragraph, but for which such benefit was subject to deductions under paragraph (1) or (2) of section 203(b) or under section 203(c), and

SEC. 203. (a) Whenever the total of monthly benefits to which individuals are entitled under section 202 for a month on the basis of the wages and self-employment income of an insured individual is more than \$50 and exceeds (1) 80 per centum of his average monthly wage, or (2) one and one-half times his primary insurance amount, whichever is the greater, such total of benefits shall, after any deductions under this section, after any deductions under section 222(b), and after any reduction under section 224, be reduced to 80 per centum of his average monthly wage or to one and one-half times his primary insurance amount, whichever is the greater, but in no case to less than \$50; except that when any of such individuals so entitled would (but for the provisions of section 202(k)(2)(A)) be entitled to child's insurance benefits on the basis of the wages and self-employment income of one or more other insured individuals, such total of benefits, after any deductions under this section, after any deductions under section 222(b), and after any reduction under section 224, shall not be reduced to less than 80 per centum of the sum of the average monthly wages of all such insured individuals. In any case in which the total of the benefits referred to in the preceding sentence, after reduction (if any) thereunder, is more than \$200, such total shall, notwithstanding the provisions of such sentence, be reduced to \$200. Whenever a reduction is made under this subsection, each benefit, except the old-age insurance benefit, shall be proportionately decreased.



(g)(1) If an individual is entitled to any monthly insurance benefit under section 202 during any taxable year in which he has earnings or wages, as computed pursuant to paragraph (4) of subsection (e), in excess of the product of \$100 times the number of months in such year, such individual (or the individual who is in receipt of such benefit on his behalf) shall make a report to the Secretary of his earnings (or wages) for such taxable year. Such report shall be made on or before the fifteenth day of the fourth month following the close of such year, and shall contain such information and be made in such manner as the Administrator may by regulations prescribe. Such report need not be made for any taxable year beginning with or after the month in which such individual attained the age of seventy-two.

#### Circumstances Under Which Deductions and Reductions Not Required

(h) In the case of any individual—

(1) deductions by reason of the provisions of subsection (b), (f), or (g) of this section, or the provisions of section 222(b), shall, notwithstanding such provisions, be made from the benefits to which such individual is entitled, and

(2) any reduction by reason of the provisions of section 224 shall, notwithstanding the provisions of such section, be made with respect to the benefits to which such individual is entitled,

only to the extent that such deductions and reduction reduce the total amount which would otherwise be paid, on the basis of the same wages and self-employment income, to such individual and the other individuals living in the same household.

#### PENALTIES

SEC. 208. Whoever, for the purpose of causing an increase in any payment authorized to be made under this title, or for the purpose of causing any payment to be made where no payment is authorized under this title, shall make or cause to be made any false statement or representation (including any false statement or representation in connection with any matter arising under subchapter E of chapter 1 or subchapter A or E of chapter 9 of the Internal Revenue Code) as to the amount of any wages paid or received or the period during which earned or paid, or as to the amount of net earnings from self-employment derived or the period during which derived, or whoever makes or causes to be made any false statement of a material fact in any application for any payment under this title, or whoever makes or causes to be made any false statement, representation, affidavit, or document in connection with such an application, shall be guilty of a misdemeanor and upon conviction thereof shall be fined not more than \$1,000 or imprisoned for not more than one year, or both.

SEC. 209.

(a)

(2) That part of remuneration which, after remuneration (other than remuneration referred to in the succeeding subsections of this section) equal to \$4,200 with respect to employment has been paid to an individual during any calendar year after 1954, is paid to such individual during such calendar year;

SEC. 210.

(a)

(1)(A) Service performed in connection with the production or harvesting of any commodity defined as an agricultural commodity in section 15(g) of the Agricultural Marketing Act, as amended;

(B) Service performed by foreign agricultural workers (i) under contracts entered into in accordance with title V of the Agricultural Act of 1949, as amended, or (ii) lawfully admitted to the United States from the Bahamas, Jamaica, and the other British West Indies, or from any foreign country or possession thereof, on a temporary basis to perform agricultural labor;

(8)

(B) Service performed in the employ of a religious, charitable, educational, or other organization exempt from income tax under section 101 (6) of the Internal Revenue Code, but this subparagraph shall not apply to service performed during the period for which a certificate, filed pursuant to section 1426 (l) of the Internal Revenue Code, is in effect if such service is performed by an employee (i) whose signature appears on the list filed by such organization under such section 1426 (l), or (ii) who became an employee of such organization after the calendar quarter in which the certificate was filed;

SEC. 211.

(b)

(1) That part of the net earnings from self-employment which is in excess of—

(A) For any taxable year ending prior to 1955, (i) \$3,600, minus (ii) the amount of the wages paid to such individual during the taxable year; and

(B) For any taxable year ending after 1954, (i) \$4,200, minus (ii) the amount of the wages paid to such individual during the taxable year; or

SEC. 213. (a)

(2)

(B)

(ii) if the wages paid to any individual in any calendar year equal \$3,600 in the case of a calendar year after 1950 and before 1955, or \$4,200 in the case of a calendar year after 1954, each quarter of such year shall (subject to clause (i)) be a quarter of coverage.<sup>2</sup>

(iii) if an individual has self-employment income for a taxable year, and if the sum of such income and the wages paid to him during such year equals \$3,600 in the case of a taxable year beginning after 1950 and ending before 1955, or \$4,200 in the case of a taxable year ending after 1954, each quarter any part of which falls in such year shall (subject to clause (i)) be a quarter of coverage;

#### PRIMARY INSURANCE AMOUNT

SEC. 215.

(a)(1) The primary insurance amount of any individual (i) who does not become eligible for benefits under section 202(a) until after August 1954, or who dies after such month and without becoming eligible for benefits under such section 202(a), and (ii) with respect to whom not less than six of the quarters elapsing after 1950 are quarters of coverage, and the primary insurance amount of any individual with respect to whom not less than six of the quarters elapsing after June 30, 1953, are quarters of coverage, shall be whichever of the following amounts is the larger:

(A) Fifty-five per centum of the first \$110 of his average monthly wage, plus 20 per centum of the next \$240; or

(B) The amount determined under subsection (c).

An individual shall, for purposes of this paragraph, be deemed eligible for benefits under section 202(a) for any month if he was or would have been, upon filing application therefor in such month, entitled to such benefits for such month.

(2) The primary insurance amount of any other individual shall be the amount determined under subsection (c).

(3) Notwithstanding paragraphs (1) and (2), in the case of any individual who in the month before the month in which he becomes entitled to old-age insurance benefits or died, whichever first occurs, was entitled to a disability insurance benefit, his primary insurance amount shall be the amount computed as provided in this section (without regard to this paragraph) or his disability insurance benefit for such earlier month, whichever is the larger.

#### Determinations Made by Use of the Conversion Table

(c)(1) Except as provided in paragraph (2) of this subsection, the amount referred to in paragraphs (1)(B) and (2) of subsection (a) for an individual shall be either the amount appearing in column III of the following table on the line on which in column I appears his primary insurance benefit (as determined under subsection (d)), or the amount appearing in column III of the following table on the line on which in column II appears his primary insurance amount (determined as provided in subsection (d)), whichever produces the higher amount; and his average monthly wage shall, for purposes of section 203(a), be the amount appearing in column IV on the line on which, in column III, appears such higher amount.

I	II	III	IV
If the primary insurance benefit (as determined under subsection (d)) is:—	Or the primary insurance amount (as determined under subsection (d)) is—	The amount referred to in paragraphs (1) (B) and (2) of subsection (a) shall be—	And the average monthly wage for purposes of computing maximum benefits shall be—
\$10.....	\$25.00	\$30.00	\$55.00
\$11.....	27.00	32.00	58.00
\$12.....	29.00	34.00	62.00
\$13.....	31.00	36.00	65.00

<sup>2</sup>As in original. Period should be a semicolon.

## SUPERSEDED PROVISIONS—SOCIAL SECURITY ACT

337 03/86

P.L. 85-840 §215.

57

I If the primary insurance benefit (as determined under subsection (d)) is:—	II Or the primary insurance amount (as de- termined under subsection (d)) is—	III The amount re- ferred to in paragraphs (1) (B) and (2) of subsection (a) shall be—	IV And the aver- age monthly wage for pur- poses of com- puting maxi- mum benefits shall be—
\$14.....	33.00	38.00	69.00
\$15.....	35.00	40.00	73.00
\$16.....	36.70	41.70	76.00
\$17.....	38.20	43.20	79.00
\$18.....	39.50	44.50	81.00
\$19.....	40.70	45.70	83.00
\$20.....	42.00	47.00	85.00
\$21.....	43.50	48.50	88.00
\$22.....	45.30	50.30	91.00
\$23.....	47.50	52.50	95.00
\$24.....	50.10	55.10	100.00
\$25.....	52.40	57.40	104.00
\$26.....	54.40	59.40	108.00
\$27.....	56.30	61.30	114.00
\$28.....	58.00	63.00	123.00
\$29.....	59.40	64.40	130.00
\$30.....	60.80	66.30	139.00
\$31.....	62.00	67.90	147.00
\$32.....	63.30	69.50	155.00
\$33.....	64.40	71.10	163.00
\$34.....	65.50	72.50	170.00
\$35.....	66.60	73.90	177.00
\$36.....	67.80	75.50	185.00
\$37.....	68.90	77.10	193.00
\$38.....	70.00	78.50	200.00
\$39.....	71.00	79.90	207.00
\$40.....	72.00	81.10	213.00
\$41.....	73.10	82.70	221.00
\$42.....	74.10	83.90	227.00
\$43.....	75.10	85.30	234.00
\$44.....	76.10	86.70	241.00
\$45.....	77.10	88.50	250.00
\$46.....	77.10	88.50	250.00
	77.20	88.50	250.00
	77.30	88.50	250.00
	77.40	88.50	250.00
	77.50	88.50	250.00
	78.00	89.10	253.00
	79.00	90.50	260.00
	80.10	91.90	267.00
	81.00	93.10	273.00
	82.00	94.50	280.00
	83.10	95.90	287.00
	84.00	97.10	293.00
	85.00	98.50	300.00

(2)(A) In case the primary insurance benefit (determined as provided in subsection (d)) of an individual falls between the amounts on any two consecutive lines in column I of the table, the amount referred to in paragraphs (1)(b) and (2) of subsection (a) for such individual shall be the amount determined (i) by applying the formula in subsection (a)(1) to the average monthly wage which would be determined for such individual under paragraph (4) of this subsection as in effect prior to the enactment of the Social Security Amendments of 1954, (ii) by increasing the amount determined under clause (i), if it is not a multiple of \$0.10, to the next higher multiple of \$0.10, and (iii) by further increasing such amount to the extent, if any, it is less than \$5 greater than the primary insurance amount which would be determined for him by use of his primary insurance benefit under paragraph (2) of this subsection as in effect prior to the enactment of the Social Security Amendments of 1954.



(b)<sup>3</sup> In case the primary insurance amount (determined under subsection (d)) of an individual falls between the amounts on any two consecutive lines in column II of the table, the amount referred to in paragraphs (1)(B) and (2) of subsection (a) for such individual shall be the amount determined under subparagraph (A) of this paragraph for an individual whose primary insurance benefit would (under paragraph (2) of this subsection as in effect prior to the enactment of the Social Security Amendments of 1954) produce such primary insurance amount; except that, if there is no primary insurance benefit which would (under such paragraph (2)) produce such primary insurance amount or if such primary insurance amount is higher than \$77.10, the amount referred to in paragraphs (1)(B) and (2) of subsection (a) for such individual shall be the amount determined (i) by applying the formula in subsection (a)(1) to the average monthly wage from which such primary insurance amount was determined, (ii) by increasing the amount determined under clause (i), if it is not a multiple of \$0.10, to the next higher multiple of \$0.10, and (iii) by further increasing such amount to the extent, if any, it is less than \$5 greater than such primary insurance amount.

(C) If the provisions of subparagraphs (A) and (B) of this paragraph are both applicable to an individual, the amount referred to in paragraphs (1)(B) and (2) of subsection (a) for such individual shall be the larger of the amounts determined under such subparagraphs.

(3) For the purpose of facilitating the use of the conversion table in computing any insurance benefit under section 202, the Secretary is authorized to assume that the primary insurance benefit from which such benefit under section 202 is determined is one cent or two cents more or less than its actual amount.

(4) For purposes of section 203(a), the average monthly wage of an individual whose primary insurance amount is determined under paragraph (2) of this subsection shall be a sum equal to the average monthly wage which would result in such primary insurance amount upon the application of the provisions of subsection (a)(1)(A) of this section and without the application of subsection (e)(2) or (g) of this section; except that, if such sum is not a multiple of \$1, it shall be rounded to the nearest multiple of \$1 (or to the next higher multiple of \$1 if it is a multiple of \$0.50).

#### Primary Insurance Benefit and Primary Insurance Amount For Purposes of Conversion Table

(d) For the purposes of subsection (c), the primary insurance benefits and the primary insurance amounts of individuals shall be determined as follows:

(1) In the case of any individual who was entitled to a primary insurance benefit for August 1950, his primary insurance benefit shall, except as provided in paragraph (2), be the primary insurance benefit to which he was so entitled.

(2) In the case of any individual to whom paragraph (1) is applicable and who is a World War II veteran or in August 1950 rendered services for wages of \$15 or more, his primary insurance benefit shall be whichever of the following is larger: (A) the primary insurance benefit to which he was entitled for August 1950, or (B) his primary insurance benefit for August 1950 recomputed, under section 209(q) of the Social Security Act as in effect prior to the enactment of this section, in the same manner as if such individual had filed application for and was entitled to a recomputation for August 1950, except that in making such recomputation section 217(a) shall be applicable if such individual is a World War II veteran.

(3) In the case of any individual who died prior to September 1950, his primary insurance benefit shall be determined as provided in this title as in effect prior to the enactment of this section, except that section 217(a) shall be applicable, in lieu of section 210 of this Act as in effect prior to the enactment of this section, but only if it results in a larger primary insurance benefit.

(4) In the case of any other individual (except an individual who attained age twenty-two after 1950 and with respect to whom not less than six of the quarters elapsing after 1950 are quarters of coverage), his primary insurance benefit shall be computed as provided in this title as in effect prior to the enactment of this section, except that—

(A) In the computation of such benefit, such individual's average monthly wage shall (in lieu of being determined under section 209(f) of such title as in effect prior to the enactment of this section) be determined as provided in subsection (b) of this section, except that his starting date shall be December 31, 1936.

(B) For purposes of such computation, the date he became entitled to old-age insurance benefits shall be deemed to be the date he became entitled to primary insurance benefits.

<sup>3</sup>As in original. Should be "(B)".

(C) The 1 per centum addition provided for in section 209(e)(2) of this Act as in effect prior to the enactment of this section shall be applicable only with respect to calendar years prior to 1951.

(D) The provisions of subsection (e) shall be applicable to such computation.

(5) In the case of any individual to whom paragraph (1), (2), or (4) of this subsection is applicable, his primary insurance benefit shall be computed as provided therein except that, for purposes of paragraphs (1) and (2) and subparagraph (C) of paragraph (4), all quarters, in any year prior to 1951 any part of which was included in a period of disability, shall be excluded from the elapsed quarters and any wages paid in such year shall not be counted. Notwithstanding the preceding sentence, the quarters in the year in which a period of disability began shall not be excluded from the elapsed quarters and the wages paid in such year shall be counted if the inclusion of such quarters and the counting of such wages result in a higher primary insurance amount.

(6) the primary insurance amount of any individual shall be computed as provided in this section as in effect prior to the enactment of this paragraph, except that the amendments made by sections 102(b) (other than paragraph (2) thereof), 104, and 106 of the Social Security Amendments of 1954 (relating, respectively, to increase in benefit amounts, increase in earnings counted, and periods of disability) shall, to the extent provided by such sections, be applicable to such computation.

(e)

(1) in computing an individual's average monthly wage there shall not be counted the excess over \$3,600 in the case of any calendar year after 1950 and before 1955, and the excess over \$4,200 in the case of any calendar year after 1954, of (A) the wages paid to him in such year, plus (B) the self-employment income credited to such year (as determined under section 212);

SEC. 216.

#### Widow

(c) The term "widow" (except when used in section 202(i)) means the surviving wife of an individual, but only if she (1) is the mother of his son or daughter, (2) legally adopted his son or daughter while she was married to him and while such son or daughter was under the age of eighteen, (3) was married to him at the time both of them legally adopted a child under the age of eighteen, or (4) was married to him for a period of not less than one year immediately prior to the day on which he died.

#### Former Wife Divorced

(d) The term "former wife divorced" means a woman divorced from an individual, but only if she (1) is the mother of his son or daughter, (2) legally adopted his son or daughter while she was married to him and while such son or daughter was under the age of eighteen, or (3) was married to him at the time both of them legally adopted a child under the age of eighteen.

#### Child

(e) The term "child" means (1) the child of an individual and (2) in the case of a living individual, a stepchild or adopted child who has been such stepchild or adopted child for not less than three years immediately preceding the day on which application for child's benefits is filed, and (3) in the case of a deceased individual, (A) an adopted child, or (B) a stepchild who has been such stepchild for not less than one year immediately preceding the day on which such individual died. In determining whether an adopted child has met the length of time requirement in clause (2), time spent in the relationship of stepchild shall be counted as time spent in the relationship of adopted child.

#### Husband

(f) The term "husband" means the husband of an individual, but only if he (1) is the father of her son or daughter, or (2) was married to her for a period of not less than three years immediately preceding the day on which his application is filed.

#### Widower

(g) The term "widower" (except when used in section 202(i)) means the surviving husband of an individual, but only if he (1) is the father of her son or daughter, (2) legally adopted her son or daughter while he was married to her and while such son or daughter was under the age of eighteen, (3) was married to her at the time both of them legally adopted a child under the age of eighteen, or (4) was married to her for a period of not less than one year immediately prior to the day on which she died.



(h)

(3) For purposes of section 202(i), a widow shall be deemed to have been living with her husband at the time of his death if they were both members of the same household on the date of his death, or she was receiving regular contributions from him toward her support on such date, or he had been ordered by any court to contribute to her support; a widower shall be deemed to have been living with his wife at the time of her death if they were both members of the same household at the time of her death, or he was receiving regular contributions from her toward his support on such date, or she had been ordered by any court to contribute to his support.

(i)

(3) The requirements referred to in clauses (A) and (B) of paragraphs (2) and (4) are satisfied by an individual with respect to any quarter only if he had not less than—

(A) six quarters of coverage (as defined in section 213(a)(2)) during the thirteen-quarter period which ends with such quarter; and

(B) twenty quarters of coverage during the forty-quarter period which ends with such quarter,

not counting as part of the thirteen-quarter period specified in clause (A), or the forty-quarter period specified in clause (B), any quarter any part of which was included in a prior period of disability unless such quarter was a quarter of coverage.

#### SEC. 218.

(d)

(6) If a retirement system covers positions of employees of the State and positions of employees of one or more political subdivisions of the State, or covers positions of employees of two or more political subdivisions of the State, then, for purposes of the preceding paragraphs of this subsection, there shall, if the State so desires, be deemed to be a separate retirement system with respect to any one or more of the political subdivisions concerned and, where the retirement system covers positions of employees of the State, a separate retirement system with respect to the State or with respect to the State and any one or more of the political subdivisions concerned. If a retirement system covers positions of employees of one or more institutions of higher learning, then, for purposes of such preceding paragraphs, there shall, if the State so desires, be deemed to be a separate retirement system for the employees of each such institution of higher learning. For the purposes of this paragraph, the term "institutions of higher learning" includes junior colleges and teachers' colleges. For the purposes of this subsection, any retirement system established by the State of California, Connecticut, Florida, Georgia, Massachusetts, Minnesota, New York, North Dakota, Pennsylvania, Rhode Island, Tennessee, Vermont, Washington, Wisconsin, or the Territory of Hawaii, or any political subdivision of any such State or Territory, which, on, before, or after the date of enactment of this sentence is divided into two divisions or parts, one of which is composed of positions of members of such system who desire coverage under an agreement under this section and the other of which is composed of positions of members of such system who do not desire such coverage, shall, if the State or Territory so desires and if it is provided that there shall be included in such division or part composed of members desiring such coverage the positions of individuals who become members of such system after such coverage is extended, be deemed to be a separate retirement system with respect to each such division or part. The position of any individual which is covered by any retirement system to which the preceding sentence is applicable shall, if such individual is ineligible to become a member of such system on the date of enactment of such sentence or, if later, the day he first occupies such position, be deemed to be covered by the separate retirement system consisting of the positions of members of the division or part who do not desire coverage under the insurance system established under this title. In the case of any retirement system divided pursuant to the fourth sentence of this paragraph the position of any member of the division or part composed of positions of members who do not desire coverage may be transferred to the separate retirement system composed of positions of members who desire such coverage if it is so provided in a modification of such agreement which is mailed, or delivered by other means, to the Secretary prior to 1960 or, if later, the expiration of one year after the date on which such agreement, or the modification thereof making the agreement applicable to such separate retirement system, as the case may be, is agreed to, but only if, prior to such modification or such later modification, as the case may be, the individual occupying such position files with the State a written request for such transfer. For the purposes of this subsection, in the case of any retirement system of the State of Florida, Georgia, Minnesota, North Dakota, Pennsylvania, Washington, or the Territory of Hawaii which covers positions of employees of such State or Territory who are compensated in whole or in part from grants made to such State or Territory under title III, there shall be deemed to be, if such State or Territory so desires, a separate retirement system with respect to any of the following:



(A) the positions of such employees; (B) the positions of all employees of such State or Territory covered by such retirement system who are employed in the department of such State or Territory in which the employees referred to in clause (A) are employed; or (C) employees of such State or Territory covered by such retirement system who are employed in such department of such State or Territory in positions other than those referred to in clause (A).

## SEC. 223.

(c)

(3) The term "waiting period" means, in the case of any application for disability insurance benefits, the earliest period of six consecutive calendar months—

(A) throughout which the individual who files such application has been under a disability, and

(B)(i) which begins not earlier than with the first day of the sixth month before the month in which such application is filed if such individual is insured for disability insurance benefits in such sixth month, or (ii) if he is not so insured in such month, which begins not earlier than with the first day of the first month after such sixth month in which he is so insured.

## REDUCTION OF BENEFITS BASED ON DISABILITY

## SEC. 224. (a) If—

(1) any individual is entitled to a disability insurance benefit for any month, or to a child's insurance benefit for the month in which he attained the age of eighteen or any subsequent month, and

(2) either (A) it is determined by any agency of the United States under any other law of the United States or under a system established by such agency that a periodic benefit is payable by such agency for such month to such individual, and the amount of or eligibility for such periodic benefit is based (in whole or in part) on a physical or mental impairment of such individual, or (B) it is determined that a periodic benefit is payable for such month to such individual under a workmen's compensation law or plan of the United States or of a State on account of a physical or mental impairment of such individual,

then the benefit referred to in paragraph (1) shall be reduced (but not below zero) by an amount equal to such periodic benefit or benefits for such month. If such benefit referred to in paragraph (1) for any month is a child's insurance benefit and the periodic benefit or benefits referred to in paragraph (2) exceed such child's insurance benefit, the monthly benefit for such month to which an individual is entitled under subsection (b) or (g) of section 202 shall also be reduced (but not below zero) by the amount of such excess, but only if such individual (i) did not attain retirement age in such month or in any prior month, and (ii) would not be entitled to such monthly benefit if she did not have such child in her care (individually or jointly with her husband, in the case of a wife).

(b) If any periodic benefit referred to in subsection (a)(2) is determined to be payable on other than a monthly basis (excluding a benefit payable in a lump sum unless it is a commutation of, or a substitute for, periodic payments), reduction of the benefits under this section shall be made at such time or times and in such amounts as the Secretary finds will approximate, as nearly as practicable, the reduction prescribed in subsection (a).

(c) In order to assure that the purposes of this section will be carried out, the Secretary may, as a condition to certification for payment of any monthly insurance benefit payable to an individual under this title (if it appears to him that such individual may be eligible for a periodic benefit which would give rise to a reduction under this section), require adequate assurance of reimbursement to the Federal Disability Insurance Trust Fund in case periodic benefits, with respect to which such a reduction should be made, become payable to such individual and such reduction is not made.

(d) Any agency of the United States which is authorized by any law of the United States to pay periodic benefits, or has a system of periodic benefits, which are based in whole or in part on physical or mental impairment, shall (at the request of the Secretary) certify to him, with respect to any individual, such information the Secretary deems necessary to carry out his functions under subsection (a).

(e) For purposes of this section, the term "agency of the United States" means any department or other agency of the United States or any instrumentality which is wholly owned by the United States. For the purposes of this section, the term "periodic benefit" does not include compensation paid to any individual under laws administered by the Veterans' Administration on account of such individual's service-connected disability.

SEC. 403. (a) From the sums appropriated therefor, the Secretary of the Treasury shall pay to each State which has an approved plan for aid to dependent children, for each quarter, beginning with the quarter commencing October 1, 1956, (1) in the case of any State other than Puerto Rico and the Virgin Islands, an amount equal to the sum of the following proportions of the total amounts expended during such quarter as aid to dependent children under the State plan, not counting so much of such expenditure with respect to any dependent child for any month as exceeds \$32, or if there is more than one dependent child in the same home, as exceeds \$32 with respect to one such dependent child and \$23 with respect to each of the other dependent children, and not counting so much of such expenditure for any month with respect to a relative with whom any dependent child is living as exceeds \$32—

(A) fourteen-seventeenths of such expenditures, not counting so much of the expenditures with respect to any month as exceeds the product of \$17 multiplied by the total number of dependent children and other individuals with respect to whom aid to dependent children is paid for such month; plus

(B) one-half of the amount by which such expenditures exceed the maximum which may be counted under clause (A);

and (2) in the case of Puerto Rico and the Virgin Islands, an amount equal to one-half of the total of the sums expended during such quarter as aid to dependent children under the State plan, not counting so much of such expenditure with respect to any dependent child for any month as exceeds \$18, or if there is more than one dependent child in the same home, as exceeds \$18 with respect to one such dependent child and \$12 with respect to each of the other dependent children, and not counting so much of such expenditure for any month with respect to a relative with whom any dependent child is living as exceeds \$18; and (3) in the case of any State, an amount equal to one-half of the total of the sums expended during such quarter as found necessary by the Secretary of Health, Education, and Welfare for the proper and efficient administration of the State plan, including services which are provided by the staff of the State agency (or of the local agency administering the State plan in the political subdivision) to relatives with whom such children (applying for or receiving such aid) are living, in order to help such relatives attain self-support or self-care, or which are provided to maintain and strengthen family life for such children.

### PART 3—CHILD-WELFARE SERVICES

SEC. 521. (a) For the purpose of enabling the United States, through the Administrator, to cooperate with State public-welfare agencies in establishing, extending, and strengthening, especially in predominantly rural areas, public-welfare services (hereinafter in this section referred to as "child-welfare services") for the protection and care of homeless, dependent, and neglected children, and children in danger of becoming delinquent, there is hereby authorized to be appropriated for each fiscal year, beginning with the fiscal year ending June 30, 1958, the sum of \$12,000,000. Such amount shall be allotted by the Administrator for use by cooperating State public-welfare agencies on the basis of plans developed jointly by the State agency and the Administrator, to each State \$40,000, and the remainder to each State on the basis of such plans, not to exceed such part of the remainder as the rural population of such State under the age of eighteen bears to the total rural population of the United States under such age. The amount so allotted shall be expended for payment of part of the cost of district, county, or other local child-welfare services in areas predominantly rural, for developing State services for the encouragement and assistance of adequate methods of community child-welfare organization in areas predominantly rural and other areas of special need, and for paying the cost of returning any runaway child who has not attained the age of sixteen to his own community in another State in cases in which such return is in the interest of the child and the cost thereof cannot otherwise be met: *Provided*, That in developing such services for children the facilities and experience of voluntary agencies shall be utilized in accordance with child-care programs and arrangements in the States and local communities as may be authorized by the State. The amount of any allotment to a State under this section for any fiscal year remaining unpaid to such State at the end of such fiscal year shall be available for payment to such State under this section until the end of the second succeeding fiscal year. No payment to a State under this section shall be made out of its allotment for any fiscal year until its allotment for the preceding fiscal year has been exhausted or has ceased to be available.

(b) From the sums appropriated therefor and the allotments available under subsection (a) the Administrator shall from time to time certify to the Secretary of the Treasury the amounts to be paid to the States, and the Secretary of the Treasury shall, through the Division of Disbursement of the Treasury Department and prior to audit or settlement by the General Accounting Office, make payments of such amounts from such allotments at the time or times specified by the Administrator.



SEC. 1003. (a) From the sums appropriated therefor, the Secretary of the Treasury shall pay to each State which has an approved plan for aid to the blind for each quarter, beginning with the quarter commencing October 1, 1956, (1) in the case of any State other than Puerto Rico and the Virgin Islands, an amount equal to the sum of the following proportions of the total amounts expended during such quarter as aid to the blind under the State plan, not counting so much of such expenditure with respect to any individual for any month as exceeds \$60—

(A) four-fifths of such expenditures, not counting so much of any expenditure with respect to any month as exceeds the product of \$30 multiplied by the total number of such individuals who received aid to the blind for such month; plus

(B) one-half of the amount by which such expenditures exceed the maximum which may be counted under clause (A);

and (2) in the case of Puerto Rico and the Virgin Islands, an amount equal to one-half of the total of the sums expended during such quarter as aid to the blind under the State plan, not counting so much of such expenditure with respect to any individual for any month as exceeds \$30; and (3) in the case of any State, an amount equal to one-half of the total of the sums expended during such quarter as found necessary by the Secretary of Health, Education, and Welfare for the proper and efficient administration of the State plan, including services which are provided by the staff of the State agency (or of the local agency administering the State plan in the political subdivision) to applicants for and recipients of aid to the blind to help them attain self-support or self-care.

SEC. 1106.

(b) Requests for information, disclosure of which is authorized by regulations prescribed pursuant to subsection (a) of this section, may be complied with if the agency, person, or organization making the request agrees to pay for the information requested in such amount, if any (not exceeding the cost of furnishing the information), as may be determined by the Administrator. Payments for information furnished pursuant to this section shall be made in advance or by way of reimbursement, as may be requested by the Administrator, and shall be deposited in the Treasury as a special deposit to be used to reimburse the appropriations (including authorizations to make expenditures from the Federal Old-Age and Survivors Insurance Trust Fund) for the unit or units of the Federal Security Agency which prepared or furnished the information.

**[SEC. 1108.]** LIMITATION ON PAYMENTS TO PUERTO RICO AND THE VIRGIN ISLANDS

SEC. 1403. (a) From the sums appropriated therefor, the Secretary of the Treasury shall pay to each State which has an approved plan for aid to the permanently and totally disabled, for each quarter, beginning with the quarter commencing October 1, 1956, (1) in the case of any State other than Puerto Rico and the Virgin Islands, an amount equal to the sum of the following proportions of the total amounts expended during such quarter as aid to the permanently and totally disabled under the State plan, not counting so much of such expenditure with respect to any individual for any month as exceeds \$60—

(A) four-fifths of such expenditures, not counting so much of any expenditure with respect to any month as exceeds the product of \$30 multiplied by the total number of such individuals who received aid to the permanently and totally disabled for such month; plus

(B) one-half of the amount by which such expenditures exceed the maximum which may be counted under clause (A);

and (2) in the case of Puerto Rico and the Virgin Islands, an amount equal to one-half of the total of the sums expended during such quarter as aid to the permanently and totally disabled under the State plan, not counting so much of such expenditure with respect to any individual for any month as exceeds \$30; and (3) in the case of any State, an amount equal to one-half of the total of the sums expended during such quarter as found necessary by the Secretary of Health, Education, and Welfare for the proper and efficient administration of the State plan, including services which are provided by the staff of the State agency (or of the local agency administering the State plan in the political subdivision) to applicants for and recipients of such aid to help them attain self-support or self-care.



**Provision of the Social Security Act as in Effect Prior to  
P.L. 86-442, Approved April 22, 1960 (74 Stat. 81)  
[Federal Employees—Unemployment Compensation Eligibility]**

TREATMENT OF ACCRUED ANNUAL LEAVE

SEC. 1505. For the purposes of this title, in the case of a Federal employee who is performing Federal service at the time of his separation from employment by the United States or any instrumentality thereof, (1) the Federal service of such employee shall be considered as continuing during the period, subsequent to such separation, with respect to which he is considered as having received payment of accumulated and current annual or vacation leave pursuant to any Federal law, and (2) subject to regulations of the Secretary concerning allocation over the period, such payment shall constitute Federal wages.

**Provision of the Social Security Act as in Effect Prior to  
P.L. 86-624, Approved July 12, 1960 (74 Stat. 411)  
Hawaii Omnibus Act**

- SEC. 1101. (a)  
(8)(A) (ii) the Federal percentage shall be 50 per centum for Hawaii

**Provisions of the Social Security Act as in Effect Prior to  
P.L. 86-778, Approved September 13, 1960 (74 Stat. 924)  
Social Security Amendments of 1960**

**TITLE I—GRANTS TO STATES FOR OLD-AGE  
ASSISTANCE**

APPROPRIATION

SECTION 1. For the purpose of enabling each State to furnish financial assistance, as far as practicable under the conditions in such State, to aged needy individuals and of encouraging each State, as far as practicable under such conditions, to help such individuals attain self-care, there is hereby authorized to be appropriated for each fiscal year a sum sufficient to carry out the purposes of this title. The sums made available under this section shall be used for making payments to States which have submitted, and had approved by the Federal Security Administrator (hereinafter referred to as the "Administrator"), State plans for old-age assistance.

STATE OLD-AGE ASSISTANCE PLANS

SEC. 2. (a) A State plan for old-age assistance must (1) provide that it shall be in effect in all political subdivisions of the State, and, if administered by them, be mandatory upon them; (2) provide for financial participation by the State; (3) either provide for the establishment or designation of a single State agency to administer the plan, or provide for the establishment or designation of a single State agency to supervise the administration of the plan; (4) provide for granting an opportunity for a fair hearing before the State agency to any individual whose claim for old-age assistance is denied or is not acted upon with reasonable promptness.<sup>1</sup> (5) provide such methods of administration (including after January 1, 1940, methods relating to the establishment and maintenance of personnel standards on a merit basis, except that the Administrator shall exercise no authority with respect to the selection, tenure of office, and compensation of any individual employed in accordance with such methods) as are found by the Administrator to be necessary for the proper and efficient operation of the plan; (6) provide that the State agency will make such reports, in such form and containing such information, as the Administrator may from time to time

<sup>1</sup>As in original. Period should be a semicolon.

require, and comply with such provisions as the Administrator may from time to time find necessary to assure the correctness and verification of such reports; (7) effective July 1, 1941, provide that the State agency shall, in determining need, take into consideration any other income and resources of an individual claiming old-age assistance; (8) effective July 1, 1941, provide safeguards which restrict the use or disclosure of information concerning applicants and recipients to purposes directly connected with the administration of old-age assistance; (9) provide that all individuals wishing to make application for old-age assistance shall have opportunity to do so, and that old-age assistance shall be furnished with reasonable promptness to all eligible individuals; (10) effective July 1, 1953, provide, if the plan includes payments to individuals in private or public institutions, for the establishment or designation of a State authority or authorities which shall be responsible for establishing and maintaining standards for such institutions; and (11) provide a description of the services (if any) which the State agency makes available to applicants for and recipients of old-age assistance to help them attain self-care, including a description of the steps taken to assure, in the provision of such services, maximum utilization of other agencies providing similar or related services.

(b) The Administrator shall approve any plan which fulfills the conditions specified in subsection (a), except that he shall not approve any plan which imposes, as a condition of eligibility for old-age assistance under the plan—

(1) An age requirement of more than sixty-five years, except that the plan may impose, effective until January 1, 1940, an age requirement of as much as seventy years; or

(2) Any residence requirement which excludes any resident of the State who has resided therein five years during the nine years immediately preceding the application for old-age assistance and has resided therein continuously for one year immediately preceding the application; or

(3) Any citizenship requirement which excludes any citizen of the United States.

SEC. 3. (a) From the sums appropriated therefor, the Secretary of the Treasury shall pay to each State which has an approved plan for old-age assistance, for each quarter, beginning with the quarter commencing October 1, 1958, (1) in the case of any State other than Puerto Rico, the Virgin Islands, and Guam, an amount equal to the sum of the following proportions of the total amounts expended during such quarter as old-age assistance under the State plan (including expenditures for insurance premiums for medical or any other type of remedial care or the cost thereof)—

(A) four-fifths of such expenditures, not counting so much of any expenditure with respect to any month as exceeds the product of \$30 multiplied by the total number of recipients of old-age assistance for such month (which total number, for purposes of this subsection, means (i) the number of individuals who received old-age assistance in the form of money payments for such month, plus (ii) the number of other individuals with respect to whom expenditures were made in such month as old-age assistance in the form of medical or any other type of remedial care); plus

(B) the Federal percentage of the amount by which such expenditures exceed the maximum which may be counted under clause (A), not counting so much of any expenditure with respect to any month as exceeds the product of \$65 multiplied by the total number of such recipients of old-age assistance for such month;

and (2) in the case of Puerto Rico, the Virgin Islands, and Guam, an amount equal to one-half of the total of the sums expended during such quarter as old-age assistance under the State plan (including expenditures for insurance premiums for medical or any other type of remedial care or the cost thereof), not counting so much of any expenditure with respect to any month as exceeds \$35 multiplied by the total number of recipients of old-age assistance for such month; and (3) in the case of any State, an amount equal to one-half of the total of the sums expended during such quarter as found necessary by the Secretary of Health, Education, and Welfare for the proper and efficient administration of the State plan, including services which are provided by the staff of the State agency (or of the local agency administering the State plan in the political subdivision) to applicants for and recipients of old-age assistance to help them attain self-care.

SEC. 201.

(c)

(3) Report immediately to the Congress whenever the Board of Trustees is of the opinion that during the ensuing five fiscal years either of the Trust Funds will exceed three times the highest annual expenditures from such Trust Fund anticipated during that five-fiscal-year period, and whenever the Board of Trustees is of the opinion that the amount of either of the Trust Funds is unduly small; and



(d) It shall be the duty of the Managing Trustee to invest such portion of the Trust Funds as is not, in his judgment, required to meet current withdrawals. Such investments may be made only in interest-bearing obligations of the United States or in obligations guaranteed as to both principal and interest by the United States. For such purpose such obligations may be acquired (1) on original issue at the issue price, or (2) by purchase of outstanding obligations at the market price. The purposes for which obligations of the United States may be issued under the Second Liberty Bond Act, as amended, are hereby extended to authorize the issuance at par of public-debt obligations for purchase by the Trust Funds. Such obligations issued for purchase by the Trust Funds shall have maturities fixed with due regard for the needs of the Trust Funds, and bear interest at a rate equal to the average rate of interest, computed as to the end of the calendar month next preceding the date of such issue, borne by all marketable interest-bearing obligations of the United States then forming a part of the Public Debt that are not due or callable until after the expiration of five years from the date of original issue; except that where such average rate is not a multiple of one-eighth of 1 per centum, the rate of interest of such obligations shall be the multiple of one-eighth of 1 per centum nearest such average rate. Such obligations shall be issued for purchase by the Trust Funds only if the Managing Trustee determines that the purchase in the market of other interest-bearing obligations of the United States, or of obligations guaranteed as to both principal and interest by the United States on original issue or at the market price, is not in the public interest.

SEC. 202.

(d)(1)

(C) was dependent upon such individual—

(i) if such individual had a period of disability which did not end prior to the month in which he became entitled to old-age or disability insurance benefits or (if he has died) prior to the month in which he died, at the beginning of such period or at the time he became entitled to such benefits or died,

(ii) if such individual did not have such a period and is living, at the time such application was filed, or

(iii) if such individual did not have such a period and has died, at the time of such death,

(3)

(C) such child was living with and was receiving more than one-half of his support from his stepfather.

SEC. 203.

#### Deductions on Account of Work or Failure To Have Child in Care

(b) Deductions, in such amounts and at such time or times as the Administrator shall determine, shall be made from any payment or payments under this title to which an individual is entitled, until the total of such deductions equals such individual's benefit or benefits under section 202 for any month—

(1) in which such individual is under the age of seventy-two and for which month he is charged with any earnings under the provisions of subsection (e) of this section; or

(2) in which such individual is under the age of seventy-two and on seven or more different calendar days of which he engaged in noncovered remunerative activity outside the United States; or

(3) in which such individual, if a wife under age 65 entitled to a wife's insurance benefit, did not have in her care (individually or jointly with her husband) a child of her husband entitled to a child's insurance benefit and such wife's insurance benefit for such month was not reduced under the provisions of section 202(q); or

(4) in which such individual, if a widow entitled to a mother's insurance benefit, did not have in her care a child of her deceased husband entitled to a child's insurance benefit; or

(5) in which such individual, if a former wife divorced entitled to a mother's insurance benefit, did not have in her care a child, of her deceased former husband, who (A) is her son, daughter, or legally adopted child and (B) is entitled to a child's insurance benefit on the basis of the wages and self-employment income of her deceased former husband.

For purposes of paragraphs (3), (4), and (5), a child shall not be considered to be entitled to a child's insurance benefit for any month in which an event specified in section 222(b) occurs with respect to such child. No deduction shall be made under this subsection from any child's insurance benefit for the month in which the child entitled to such benefit attained the age of eighteen or any subsequent month.



Deductions From Dependents' Benefits Because of Work by Old-Age  
Insurance Beneficiary

(c)(1) Deductions shall be made from any wife's, husband's, or child's insurance benefit, based on the wages and self-employment income of an individual entitled to old-age insurance benefits, to which a wife, husband, or child is entitled, until the total of such deductions equals such wife's, husband's, or child's insurance benefit or benefits under section 202 for any month—

(A) in which the individual, on the basis of whose wages and self-employment income such benefit was payable, is under the age of seventy-two and for which month he is charged with any earnings under the provisions of subsection (e) of this section; or

(B) in which the individual referred to in subparagraph (A) is under the age of seventy-two and on seven or more different calendar days of which he engaged in noncovered remunerative activity outside the United States.

(2) Deductions shall be made from any child's insurance benefit to which a child who has attained the age of eighteen is entitled or from any mother's insurance benefit to which a person is entitled, until the total of such deductions equals such child's insurance benefit or benefits or mother's insurance benefit or benefits under section 202 for any month—

(A) in which such child or person entitled to mother's insurance benefit is married to an individual entitled to old-age insurance benefits under section 202(a) who is under the age of seventy-two and for which month such individual is charged with any earnings under the provisions of subsection (e) of this section, or

(B) in which such child or person entitled to mother's insurance benefits is married to the individual referred to in subparagraph (A) and on seven or more different calendar days of which such individual engaged in noncovered remunerative activity outside the United States.

Occurrence of More Than One Event

(e)<sup>2</sup> If more than one of the events specified in subsections (b) and (c) and section 222(b) occurs in any one month which would occasion deductions equal to a benefit for such month, only an amount equal to such benefit shall be deducted. The charging of earnings to any month shall be treated as an event occurring in such month.

Months to Which Earnings Are Charged

(f)<sup>3</sup> For the purposes of subsections (b) and (c)—

(1) If an individual's earnings for a taxable year of twelve months are not more than \$1,200, no month in such year shall be charged with any earnings. If an individual's earnings for a taxable year of less than twelve months are not more than the product of \$100 times the number of months in such year, no month in such year shall be charged with any earnings.

(2) If an individual's earnings for a taxable year of twelve months are in excess of \$1,200, the amount of his earnings in excess of \$1,200 shall be charged to months as follows: The first \$80 of such excess shall be charged to the first month of such taxable year, and the balance, if any, of such excess shall be charged at the rate of \$80 per month to each succeeding month in such year to which such charging is not prohibited by the last sentence of this paragraph, until all of such balance has been applied. If an individual's earnings for a taxable year of less than twelve months are more than the product of \$100 times the number of months in such year, the amount of such earnings in excess of such product shall be charged to months as follows: The first \$80 of such excess shall be charged to the first month of such taxable year, and the balance, if any, shall be charged at the rate of \$80 per month to each succeeding month in such year to which such charging is not prohibited by the last sentence of this paragraph, until all of such balance has been applied. Notwithstanding the preceding provisions of this paragraph, no part of the excess referred to in such provisions shall be charged to any month (A) for which the individual whose earnings are involved was not entitled to a benefit under this title, (B) in which an event described in paragraph (2), (3), (4), or (5) of subsection (b) occurred, (C) in which such individual was age seventy-two or over, or (D) in which such individual did not engage in self-employment and did not render services for wages (determined as provided in paragraph (4) of this subsection) of more than \$100.

<sup>2</sup>P.L. 86-778, §211(c), redesignated the former subsection (d) as subsection (e).

<sup>3</sup>P.L. 86-778, §211(c), redesignated the former subsection (e) as subsection (f).

(3)(A) As used in paragraph (2), the term "first month of such taxable year" means the earliest month in such year to which the charging of the excess described in such paragraph is not prohibited by the application of clauses (A), (B), (C), and (D) thereof.

(B) For purposes of clause (D) of paragraph (2)—

(i) An individual will be presumed, with respect to any month, to have been engaged in self-employment in such month until it is shown to the satisfaction of the Secretary that such individual rendered no substantial services in such month with respect to any trade or business the net income or loss of which is includible in computing (as provided in paragraph (4) of this subsection) his net earnings or net loss from self-employment for any taxable year. The Secretary shall by regulations prescribe the methods and criteria for determining whether or not an individual has rendered substantial services with respect to any trade or business.

(ii) An individual will be presumed, with respect to any month, to have rendered services for wages (determined as provided in paragraph (4) of this subsection) of more than \$100 until it is shown to the satisfaction of the Secretary that such individual did not render such services in such month for more than such amount.

(4)(A) An individual's earnings for a taxable year shall be (i) the sum of his wages for services rendered in such year and his net earnings from self-employment for such year, minus (ii) any net loss from self-employment for such year.

(B) In determining an individual's net earnings from self-employment and his net loss from self-employment for purposes of subparagraph (A) of this paragraph and subparagraph (B) of paragraph (3), the provisions of section 211, other than paragraphs (1), (4), and (5) of subsection (c), shall be applicable; and any excess of income over deductions resulting from such a computation shall be his net earnings from self-employment and any excess of deductions over income so resulting shall be his net loss from self-employment.

(C) For purposes of this subsection, an individual's wages shall be computed without regard to the limitations as to amounts of remuneration specified in subsections (a), (g)(2), (g)(3), (h)(2), and (j) of section 209; and in making such computation services which do not constitute employment as defined in section 210, performed within the United States by the individual as an employee or performed outside the United States in the active military or naval service of the United States, shall be deemed to be employment as so defined if the remuneration for such services is not includible in computing his net earnings or net loss from self-employment.

(5) For purposes of this subsection, wages (determined as provided in paragraph (4)(C)) which, according to reports received by the Secretary, are paid to an individual during a taxable year shall be presumed to have been paid to him for services performed in such year until it is shown to the satisfaction of the Secretary that they were paid for services performed in another taxable year. If such reports with respect to an individual show his wages for a calendar year, such individual's taxable year shall be presumed to be a calendar year for purposes of this subsection until it is shown to the satisfaction of the Secretary that his taxable year is not a calendar year.

SEC. 205.

(c)

(5)

(F) to conform his records to tax returns or portions thereof (including information returns and other written statements) filed with the Commissioner of Internal Revenue under title VIII of the Social Security Act, under subchapter E of chapter 1 or subchapter A of chapter 9 of the Internal Revenue Code, or under regulations made under authority of such title or subchapter, and to information returns filed by a State pursuant to an agreement under section 218 or regulations of the Administrator thereunder; except that no amount of self-employment income of an individual for any taxable year (if such return or statement was filed after the expiration of the time limitation following the taxable year) shall be included in the Administrator's records pursuant to this subparagraph;

SEC. 210.

(a)

(3) Service performed by an individual in the employ of his son, daughter, or spouse, and service performed by a child under the age of twenty-one in the employ of his father or mother;



(7) Service (other than service included under an agreement under section 218 and other than service which, under subsection (l), constitutes covered transportation service) performed in the employ of a State, or any political subdivision thereof, or any instrumentality of any one or more of the foregoing which is wholly owned by one or more States or political subdivisions;

#### State

(h) The term "State" includes the District of Columbia and the Virgin Islands; and on and after the effective date specified in section 219 such term includes Puerto Rico.

#### United States

(i) The term "United States" when used in a geographical sense means the States, the District of Columbia, and the Virgin Islands; and on and after the effective date specified in section 219 such term includes Puerto Rico.

#### Citizen of Puerto Rico

(j) An individual who is a citizen of Puerto Rico (but not otherwise a citizen of the United States) and who is not a resident of the United States shall not be considered, for the purposes of this section, as a citizen of the United States prior to the effective date specified in section 219.

#### SEC. 211.

(a) (6)(A) In the case of any taxable year beginning before the effective date specified in section 219, the term "possession of the United States" when used in section 251 of the Internal Revenue Code with respect to citizens of the United States shall include Puerto Rico;

(B) In the case of any taxable year beginning on or after the effective date specified in section 219, a resident of Puerto Rico shall compute his net earnings from self-employment in the same manner as a citizen of the United States but without regard to the provisions of section 116(l) of such code;

(c) (2) The performance of service by an individual as an employee (other than service described in section 210(a)(14)(B) performed by an individual who has attained the age of eighteen, service described in section 210(a)(16), and service described in paragraph (4) of this subsection);

#### SEC. 213. (a)

(2)(A) The term "quarter of coverage" means, in the case of any quarter occurring prior to 1951, a quarter in which the individual has been paid \$50 or more in wages, except that no quarter any part of which was included in a period of disability (as defined in section 216(i)), other than the initial quarter of such period, shall be a quarter of coverage. In the case of any individual who has been paid, in a calendar year prior to 1951, \$3,000 or more in wages, each quarter of such year following his first quarter of coverage shall be deemed a quarter of coverage, excepting any quarter in such year in which such individual died or became entitled to a primary insurance benefit and any quarter succeeding such quarter in which he died or became so entitled, and excepting any quarter any part of which was included in a period of disability, other than the initial quarter of such period.

(B) The term "quarter of coverage" means, in the case of a quarter occurring after 1950, a quarter in which the individual has been paid \$50 or more in wages (except wages for agricultural labor paid after 1954) or for which he has been credited (as determined under section 212) with \$100 or more of self-employment income, except that—

(i) no quarter after the quarter in which such individual died shall be a quarter of coverage, and no quarter any part of which was included in a period of disability (other than the initial quarter and the last quarter of such period) shall be a quarter of coverage;

#### SEC. 214.

#### Fully Insured Individual

(a)(1) In the case of any individual who died prior to September 1, 1950, the term "fully insured individual" means any individual who had not less than one quarter of coverage (whenever acquired) for each two of the quarters elapsing after 1936, or after the quarter in which he attained the age of twenty-one, whichever is later, and up to but excluding the quarter in which he attained retirement age, or died, whichever first



occurred, except that in no case shall an individual be a fully insured individual unless he has at least six quarters of coverage.

(2) In the case of any individual who did not die prior to September 1, 1950, the term "fully insured individual" means any individual who had not less than—

(A) one quarter of coverage (whether acquired before or after such day) for each two of the quarters elapsing after 1950, or after the quarter in which he attained the age of twenty-one, whichever is later, and up to but excluding the quarter in which he attained retirement age, or died, whichever first occurred, except that in no case shall an individual be a fully insured individual unless he has at least six quarters of coverage; or

(B) forty quarters of coverage, not counting as an elapsed quarter for purposes of subparagraph (A) any quarter any part of which was included in a period of disability (as defined in section 216(i)) unless such quarter was a quarter of coverage.

(3) In the case of any individual who did not die prior to January 1, 1955, the term "fully insured individual" means any individual who meets the requirements of paragraph (2) and, in addition, any individual with respect to whom all but four of the quarters elapsing after 1954 and prior to (i) July 1, 1957, or (ii) if later, the quarter in which he attained retirement age or died, whichever first occurred, are quarters of coverage, but only if not fewer than six of such quarters so elapsing are quarters of coverage.

(4) When the number of elapsed quarters specified in paragraph (1) or (2)(A) is an odd number, for purposes of such paragraph such number shall be reduced by one.

#### SEC. 215.

##### Average Monthly Wage

(b)(1) For the purposes of column III of the table appearing in subsection (a) of this section, an individual's "average monthly wage" shall be the quotient obtained by dividing the total of his wages and self-employment income after his starting date (determined under paragraph (2)) and prior to his closing date (determined under paragraph (3)), by the number of months elapsing after such starting date and prior to such closing date, excluding from such elapsed months—

(A) the months in any year prior to the year in which he attained the age of twenty-two if less than two quarters of such prior year were quarters of coverage, and

(B) the months in any year any part of which was included in a period of disability except the months in the year in which such period of disability began if their inclusion in such elapsed months (together with the inclusion of the wages paid in and self-employment income credited to such year) will result in a higher primary insurance amount.

Notwithstanding the preceding provisions of this paragraph when the number of the elapsed months computed under such provisions (including a computation after the application of paragraph (4)) is less than eighteen, it shall be increased to eighteen.

(2) An individual's "starting date" shall be—

(A) December 31, 1950, or

(B) if later, the last day of the year in which he attains the age of twenty-one, whichever results in the higher primary insurance amount.

(3) An individual's "closing date" shall be whichever of the following results in the higher primary insurance amount:

(A) the first day of the year in which he died or became entitled to old-age insurance benefits, whichever first occurred; or

(B) the first day of the first year in which he both was fully insured and had attained retirement age;

except that if the Secretary determines, on the basis of the evidence available to him at the time of the computation of the individual's primary insurance amount with respect to which such closing date is applicable, that it would result in a higher primary insurance amount for such individual, his closing date shall be the first day of the year following the year referred to in subparagraph (A).

(4) In the case of any individual, the Secretary shall determine the five or fewer full calendar years after his starting date and prior to his closing date which, if the months of such years and his wages and self-employment income for such years were excluded in computing his average monthly wage, would produce the highest primary insurance amount. Such months and such wages and self-employment income shall be excluded for purposes of computing such individual's average monthly wage.

(5) The provisions of this subsection shall be applicable only in the case of an individual with respect to whom not less than six of the quarters elapsing after 1950 are quarters of coverage, and—

(A) who becomes entitled to benefits under section 202(a) or section 223 after December 1958, or

(B) who dies after such month without being entitled to benefits under such section 202(a) or section 223, or

(C) who files an application for a recomputation under section 215(f)(2)(A) after such month and is (or would, but for the provisions of section 215(f)(6), be) entitled to have his primary insurance amount recomputed under such section, or

(D) who dies after such month and whose survivors are (or would, but for the provisions of section 215(f)(6), be) entitled to a recomputation of his primary insurance amount under section 215(f)(4); or

(E) who files an application for a recomputation under subparagraph (B) of section 102(f)(2) of the Social Security Amendments of 1954 after such month and is (or would, but for the fact that such recomputation would not result in a higher primary insurance amount for such individual, be) entitled to have his primary insurance amount recomputed under such subparagraph.

(c)

(2)

(B) to whom the provisions of paragraph (5) of subsection (b) are not applicable.

(d)(1)

(A) In the computation of such benefit, such individual's average monthly wage shall (in lieu of being determined under section 209(f) of such title as in effect prior to the enactment of such amendments) be determined as provided in subsection (b) of this section (but without regard to paragraph (5) thereof), except that his starting date shall be December 31, 1936.

(e)

(3) if an individual's closing date is determined under paragraph (3)(A) of subsection (b) and he has self-employment income in a taxable year which begins prior to such closing date and ends after the last day of the month preceding the month in which he becomes entitled to old-age insurance benefits, there shall not be counted, in determining his average monthly wage, his self-employment income in such taxable year, except as provided in section 215(f)(3)(C); and

(4) in computing an individual's average monthly wage, there shall not be counted—

(A) any wages paid such individual in any year any part of which was included in a period of disability, or

(B) any self-employment income of such individual credited pursuant to section 212 to any year any part of which was included in a period of disability.<sup>4</sup>

unless the months of such year are included as elapsed months pursuant to section 215(b)(1)(B).

(f)

(2)

(B) A recomputation pursuant to subparagraph (A) shall be made as provided in subsection (a) of this section and as though the individual first became entitled to old-age insurance benefits in the month in which he filed the application for such recomputation, but only if the provisions of subsection (b)(4) were not applicable to the last previous computation of his primary insurance amount. If the provisions of subsection (b)(4) were applicable to such previous computation, the recomputation under subparagraph (A) of this paragraph shall be made only as provided in subsection (a)(1) (other than subparagraph (B) thereof) and for such purposes his average monthly wage shall be determined as though he became entitled to old-age insurance benefits in the month in which he filed the application for recomputation under subparagraph (A), except that, of the provisions of paragraph (3) of subsection (b), only the provisions of subparagraph (A) thereof shall be applicable.

(3)(A) Upon application by an individual—

(i) who became (without the application of section 202(j)(1)) entitled to old-age insurance benefits under section 202(a) after August 1954, or

(ii) whose primary insurance amount was recomputed under section 102(e)(5) or 102(f)(2)(B) of the Social Security Amendments of 1954, or

(iii) whose primary insurance amount was recomputed as provided in the first sentence of paragraph (2)(B) of this subsection on the basis of an application filed after August, 1954,

the Secretary shall recompute his primary insurance amount if such application is filed after the year in which he became entitled to old-age insurance benefits or in which he filed his application for the last recomputation (to which he was entitled) of

<sup>4</sup>As in original. Period should be a comma.



his primary insurance amount under any provision of law referred to in clause (ii) or (iii) of this sentence, whichever is the later. Such recomputation under this subparagraph shall be made in the manner provided in the preceding subsections of this section for computation of his primary insurance amount, except that his closing date for purposes of subsection (b) shall be the first day of the year following the year in which he became entitled to old-age insurance benefits or in which he filed his application for the last recomputation (to which he was entitled) of his primary insurance amount under any provision of law referred to in clause (ii) or (iii) of the preceding sentence, whichever is the later. Such recomputation under this subparagraph shall be effective for and after the first month for which his last previous computation of his primary insurance amount was effective, but in no event for any month prior to the twenty-fourth month before the month in which the application for such recomputation is filed.

(B) In the case of an individual who dies after August 1954—

(i) who, at the time of death, was not entitled to old-age insurance benefits under section 202(a), or who became entitled to old-age insurance benefits under section 202(a) after August 1954, or whose primary insurance amount was recomputed under paragraph (2) or (4) of this subsection, or section 102(e)(5) or section 102(f)(2)(B) of the Social Security Amendments of 1954, on the basis of an application filed after August 1954; and

(ii) with respect to whom the last previous computation or recomputation of his primary insurance amount was based upon a closing date determined under subparagraph (A) or (B) of subsection (b)(3) of this section, the Secretary shall recompute his primary insurance amount upon the filing of an application by a person entitled to monthly benefits or a lump-sum death payment on the basis of his wages and self-employment income. Such recomputation shall be made in the manner provided in the preceding subsections of this section for computation of such amount, except that his closing date for purposes of subsection (b) shall be the day following the year of death in case he died without becoming entitled to old-age insurance benefits, or, in case he was entitled to old-age insurance benefits, the day following the year in which was filed the application for the last previous computation of his primary insurance amount or in which the individual died, whichever first occurred. In the case of monthly benefits, such recomputation shall be effective for and after the month in which the person entitled to such monthly benefits became so entitled, but in no event for any month prior to the twenty-fourth month before the month in which the application for such recomputation is filed.

(C) If an individual's closing date is determined under paragraph (3)(A) of subsection (b) of this section and he has self-employment income in a taxable year which begins prior to such closing date and ends after the last day of the month preceding the month in which he became entitled to old-age insurance benefits, the Secretary shall recompute his primary insurance amount after the close of such taxable year, taking into account only such self-employment income in such taxable year as is, pursuant to section 212, allocated to calendar quarters prior to such closing date. Such recomputation shall be effective for and after the first month in which he became entitled to old-age insurance benefits.

#### SEC. 218.

(f)(1)

(A) in the case of an agreement or modification agreed to prior to 1954, such date may not be earlier than December 31, 1950;

(B) in the case of an agreement or modification agreed to after 1954 but prior to 1958, such date may not be earlier than December 31, 1954;

(C) in the case of an agreement or modification agreed to after 1957 but prior to 1960, such date may not be earlier than December 31, 1955; and

(D) in the case of an agreement or modification agreed to during 1954 or after 1959, such date may not be earlier than the last day of the calendar year preceding the year in which such agreement or modification, as the case may be, is agreed to by the Secretary of Health, Education, and Welfare and the State.

#### EFFECTIVE DATE IN CASE OF PUERTO RICO

SEC. 219. If the Governor of Puerto Rico certifies to the President of the United States that the legislature of Puerto Rico has, by concurrent resolution, resolved that it desires the extension to Puerto Rico of the provisions of this title, the effective date referred to in sections 210(h), 210(i), 210(j), 211(a)(7), and 211(b) shall be January 1 of the first calendar year which begins more than ninety days after the date on which the President receives such certification.



SEC. 222.

## Service Performed Under Rehabilitation Program

(c) For purposes of sections 216(i) and 223, an individual shall not be regarded as able to engage in substantial gainful activity solely by reason of services rendered by him pursuant to a program for his rehabilitation carried on under a State plan approved under the Vocational Rehabilitation Act. This subsection shall not apply with respect to any such services rendered after the eleventh month following the first month during which such services are rendered.

## SEC. 223. (a)

(2) Such individual's disability insurance benefit for any month shall be equal to his primary insurance amount for such month determined under section 215 as though he became entitled to old-age insurance benefits in the first month of his waiting period.

(2) Such individual's disability insurance benefit for any month shall be equal to his primary insurance amount for such month determined under section 215 as though he became entitled to old-age insurance benefits in—

(A) the first month of his waiting period, or

(B) in any case in which clause (ii) of paragraph (1) of this subsection is applicable, the first month for which he becomes so entitled to such disability insurance benefits.<sup>5</sup>

SEC. 301. For the purpose of assisting the States in the administration of their unemployment compensation laws, there is hereby authorized to be appropriated for the fiscal year ending June 30, 1936, the sum of \$4,000,000, for each fiscal year thereafter up to and including the fiscal year ending June 30, 1938, the sum of \$49,000,000, and for the fiscal year ending June 30, 1939, and for each fiscal year thereafter, the sum of \$80,000,000, to be used as hereinafter provided.

## TITLE IX—MISCELLANEOUS PROVISIONS RELATING TO EMPLOYMENT SECURITY

## APPROPRIATIONS

SEC. 901. (a)(1) There are hereby appropriated to the Unemployment Trust Fund, out of any moneys in the Treasury not otherwise appropriated, for the fiscal year ending June 30, 1954, and for each fiscal year thereafter, an amount equal to the amount by which—

(A) 100 per centum of the tax (including interest, penalties, and additions to the tax) received during the fiscal year under the Federal Unemployment Tax Act and covered into the Treasury; exceeds

(B) the sum of (i) the employment security administrative expenditures for such year, (ii) the refunds of such tax (including interest on such refunds) made during such fiscal year, and (iii) the amounts appropriated by section 1202(b) for such fiscal year.

(2) The amount appropriated by paragraph (1) for any fiscal year shall be transferred from the general fund in the Treasury to the Unemployment Trust Fund at the close of such fiscal year. Each such transfer shall be based on estimates made by the Secretary of the Treasury as of the close of such fiscal year, but proper adjustment shall be made in the amount transferred at the close of the succeeding fiscal year to the extent that such estimates prove to be erroneous. The Secretary of the Treasury shall make his estimate of those employment security administrative expenditures for any fiscal year which are described in subsection (b)(1) only after consultation with the Secretary of Labor.

(b) For the purposes of subsection (a), the term "employment security administrative expenditures" means, in the case of any fiscal year, the sum of—

(1) the aggregate of the amounts expended during the fiscal year for the purpose of assisting the States in (A) the administration of their unemployment compensation laws (including administration pursuant to agreements under title IV of the Veterans' Readjustment Assistance Act of 1952), (B) the establishment and maintenance of systems of public employment offices in accordance with the Act of June 6, 1933, as amended (29 U.S.C., sec. 49-49n), and (C) carrying into effect section 602 of the Servicemen's Readjustment Act of 1944, as amended; and

(2) the amount estimated by the Secretary of Labor as equal to the necessary expenses incurred during the fiscal year for the performance by the Department of Labor of its functions (except its functions with respect to Puerto Rico and the

<sup>5</sup>This subsection was effective with respect to benefits payable for September 1960 through December 1960.

Virgin Islands) under (i) this title and titles III and XII of this Act, (ii) the Federal Unemployment Tax Act, (iii) the provisions of the Act of June 6, 1933, as amended, (iv) title IV (except section 602) of the Servicemen's Readjustment Act of 1944, as amended, and (v) title IV of the Veterans' Readjustment Act of 1952; and

(3) the amount estimated by the Secretary of the Treasury as equal to the necessary expenses incurred during the fiscal year for the performance by the Department of the Treasury of its functions under this title and titles III and XII of this Act and under the Federal Unemployment Tax Act.

#### AMOUNTS CREDITED TO FEDERAL UNEMPLOYMENT ACCOUNT

SEC. 902. Whenever any amount is transferred to the Unemployment Trust Fund under section 901(a), there shall be credited (as of the beginning of the succeeding fiscal year) to the Federal unemployment account so much of such amount as equals whichever of the following is the lesser:

(1) The total amount so transferred; or

(2) The amount by which \$200,000,000 exceeds the adjusted balance in the Federal unemployment account at the close of the fiscal year for which the transfer is made.

For the purposes of the preceding sentence, the term "adjusted balance" means the amount by which the balance in the Federal unemployment account exceeds the sum of the outstanding advances under section 1202(c) to the Federal unemployment account.

#### AMOUNTS CREDITED TO STATES' ACCOUNTS

SEC. 903. (a) So much of any amount transferred to the Unemployment Trust Fund at the close of any fiscal year under section 901(a) as is not credited to the Federal unemployment account under section 902 shall be credited (as of the beginning of the succeeding fiscal year) to the accounts of the States in the Unemployment Trust Fund. Each State's share of the funds to be credited under this subsection as of any July 1 shall be determined by the Secretary of Labor and certified by him to the Secretary of the Treasury on or before that date on the basis of reports furnished by the States to the Secretary of Labor by June 1 and shall bear the same ratio to the total amount to be so credited as the amount of wages subject to contributions under such State unemployment compensation law during the preceding calendar year which have been reported to the State by May 1 bears to the total of wages subject to contributions under all State compensation laws during such calendar year which have been reported to the States by such May 1.

(b) If the Secretary of Labor finds that on July 1 of any fiscal year—

(1) a State is not eligible for certification under section 303, or

(2) the law of a State is not approvable under section 1603 of the Federal Unemployment Tax Act,

then the amount available for crediting to such State's account shall, in lieu of being so credited, be credited to the Federal unemployment account as of the beginning of such July 1. If, during the fiscal year beginning on such July 1, the Secretary of Labor finds and certifies to the Secretary of the Treasury that such State is eligible for certification under section 303, that the law of such State is approvable under such section 1603, or both, the Secretary of the Treasury shall transfer such amount from the Federal unemployment account to the account of such State. If the Secretary of Labor does not so find and certify to the Secretary of the Treasury before the close of such fiscal year then the amount which was available for credit to such State's account as of July 1 of such fiscal year shall (as of the close of such fiscal year) become unrestricted as to use as part of the Federal unemployment account.

(c)(1) Amounts credited to the account of a State pursuant to subsection (a) shall, except as provided in paragraph (2), be used only in the payment of cash benefits to individuals with respect to their unemployment, exclusive of expenses of administration.

(2) A State may, pursuant to a specific appropriation made by the legislative body of the State, use money withdrawn from its account in the payment of expenses incurred by it for the administration of its unemployment compensation law and public employment offices if and only if—

(A) the purposes and amounts were specified in the law making the appropriation,

(B) the appropriation law did not authorize the expenditure of such money after the close of the two-year period which began on the date of enactment of the appropriation law,

(C) the money is withdrawn and the expenses are incurred after such date of enactment, and



(D) the appropriation law limits the total amount which may be so used during a fiscal year to an amount which does not exceed the amount by which (i) the aggregate of the amounts credited to the account of such State pursuant to subsection (a) during such fiscal year and the four preceding fiscal years, exceeds (ii) the aggregate of the amounts used by the State pursuant to this paragraph and charged against the amounts credited to the account of such State during any of such five fiscal years.

For the purposes of subparagraph (D), amounts used by a State during any fiscal year shall be charged against equivalent amounts which were first credited and which have not previously been so charged; except that no amount used during any fiscal year may be charged against any amount credited during a fiscal year earlier than the fourth preceding fiscal year.

## UNEMPLOYMENT TRUST FUND

SEC. 904. (a) There is hereby established in the Treasury of the United States a trust fund to be known as the "unemployment trust fund", hereinafter in this title called the "fund". The Secretary of the Treasury is authorized and directed to receive and hold in the fund all moneys deposited therein by a State agency from a State unemployment fund, or by the Railroad Retirement Board to the credit of the railroad unemployment insurance account or the railroad unemployment insurance administration fund,<sup>6</sup> or otherwise deposited in or credited to the Fund or any account therein. Such deposit may be made directly with the Secretary of the Treasury or with any Federal Reserve bank or member bank of the Federal Reserve System designated by him for such purpose.

(b) It shall be the duty of the Secretary of the Treasury to invest such portion of the Fund as is not, in his judgment, required to meet current withdrawals. Such investment may be made only in interest bearing obligations of the United States or in obligations guaranteed as to both principal and interest by the United States. For such purpose such obligations may be acquired (1) on original issue at the issue price, or (2) by purchase of outstanding obligations at the market price. The purposes for which obligations of the United States may be issued under the Second Liberty Bond Act, as amended, are hereby extended to authorize the issuance at par of special obligations exclusively to the Fund. Such special obligations shall bear interest at a rate equal to the average rate of interest, computed as of the end of the calendar month next preceding the date of such issue, borne by all interest-bearing obligations of the United States then forming part of the public debt; except that where such average rate is not a multiple of one-eighth of 1 per centum, the rate of interest of such special obligations shall be the multiple of one-eighth of 1 per centum next lower than such average rate. Obligations other than such special obligations may be acquired for the Fund only on such terms as to provide an investment yield not less than the yield which would be required in the case of special obligations if issued to the Fund upon the date of such acquisition. Advances to the Federal unemployment account pursuant to section 1202(c) shall not be invested.

(c) Any obligations acquired by the Fund (except special obligations issued exclusively to the Fund) may be sold at the market price, and such special obligations may be redeemed at par plus accrued interest.

(d) The interest on, and the proceeds from the sale or redemption of, any obligations held in the Fund shall be credited to and form a part of the Fund.

(e) The fund shall be invested as a single fund, but the Secretary of the Treasury shall maintain a separate book account for each State agency, the Federal unemployment account, the railroad unemployment insurance account, and the railroad unemployment insurance administration fund and shall credit quarterly on March 31, June 30, September 30, and December 31, of each year, to each account, on the basis of the average daily balance of such account, a proportionate part of the earnings of the fund for the quarter ending on such date. For the purposes of this subsection, the average daily balance shall be computed—

(1) in the case of any State account, by reducing (but not below zero) the amount in the account by the aggregate of the outstanding advances under section 1201 from the Federal unemployment account, and

(2) in the case of the Federal unemployment account, (A) by adding to the amount in the account the aggregate of the reductions under paragraph (1), and (B) by subtracting from the sum so obtained the aggregate of the outstanding advances from the Treasury to the account pursuant to section 1202(c).

(f) The Secretary of the Treasury is authorized and directed to pay out of the Fund to any State agency such amount as it may duly requisition, not exceeding the amount

<sup>6</sup>As in original. One comma should be stricken.



standing to the account of such State agency at the time of such payment. The Secretary of the Treasury is authorized and directed to make such payments out of the railroad unemployment insurance account for the payment of benefits, and out of the railroad unemployment insurance administration fund for the payment of administrative expenses, as the Railroad Retirement Board may duly certify, not exceeding the amount standing to the credit of such account or such fund, as the case may be, at the time of such payment.

**[(g) Repealed.]**

(h) There is hereby established in the Unemployment Trust Fund a Federal unemployment account. There is hereby authorized to be appropriated to such Federal unemployment account a sum equal to (1) the excess of taxes collected prior to July 1, 1946, under title IX of this Act or under the Federal Unemployment Tax Act, over the total unemployment administrative expenditures made prior to July 1, 1946, plus (2) the excess of taxes collected under the Federal Unemployment Tax Act after June 30, 1946, and prior to July 1, 1953, over the unemployment administrative expenditures made after June 30, 1946, and prior to July 1, 1953. As used in this subsection, the term "unemployment administrative expenditures" means expenditures for grants under title III of this Act, expenditures for the administration of that title by the Board or the Administrator, and expenditures for the administration of title IX of this Act, or of the Federal Unemployment Tax Act by the Department of the Treasury, the Board, or the Administrator. For the purposes of this subsection there shall be deducted from the total amount of taxes collected prior to July 1, 1943, under title IX of this Act, the sum of \$40,561,886.43 which was authorized to be appropriated by the Act of August 24, 1937 (50 Stat. 754) and the sum of \$18,451,846 which was authorized to be appropriated by section 11(b) of the Railroad Unemployment Insurance Act.

SEC. 1002. (a) (8) provide that the State agency shall, in determining need, take into consideration any other income and resources of the individual claiming aid to the blind; except that, in making such determination, the State agency shall disregard the first \$50 per month of earned income;

(8) provide that the State agency shall, in determining need, take into consideration any other income and resources of the individual claiming aid to the blind; except that, in making such determination, the State agency shall disregard either (i) the first \$50 per month of earned income, or (ii) the first \$85 per month of earned income plus one-half of earned income in excess of \$85 per month;<sup>a</sup>

**SEC. 1101.**

(a)

(1) The term "State" includes the District of Columbia, and when used in titles I, IV, V, VII, X, and XIV includes Puerto Rico, the Virgin Islands, and Guam.

(2) The term "United States" when used in a geographical sense means the States and the District of Columbia.

## TITLE XII—ADVANCES TO STATE UNEMPLOYMENT FUNDS

**SEC. 1201. (a) If—**

(1) the balance in the unemployment fund of a State in the Unemployment Trust Fund at the close of September 30, 1953, or at the close of the last day in any ensuing calendar quarter, is less than the total compensation paid out under the unemployment compensation law of such State during the twelve-month period ending at the close of such day;

(2) the Governor of such State applies to the Secretary of Labor during the calendar quarter following such day for an advance under this subsection; and

(3) the Secretary of Labor finds that the conditions specified in paragraphs (1) and (2) have been met,

the Secretary of Labor shall certify to the Secretary of the Treasury such amounts as may be specified in the application of the Governor, but the aggregate of the amounts so certified pursuant to any such application shall not exceed the highest total compensation paid out under the unemployment compensation law of such State during any one of the four calendar quarters preceding the quarter in which such application was made. For the purposes of this subsection, (A) the application shall be made on such forms, and shall contain such information and data (fiscal and otherwise) concerning the operation and administration of the State unemployment compensation law, as the Secretary of Labor deems necessary or relevant to the performance of his duties under this title, and (B) the term "compensation" means

<sup>a</sup>P.L. 83-567, §5(e); 68 Stat. 673.

<sup>a</sup>This clause was effective from October 1, 1960 through June 30, 1962.

cash benefits payable to individuals with respect to their unemployment, exclusive of expenses of administration.

(b) The Secretary of the Treasury shall, prior to audit or settlement by the General Accounting Office, transfer from the Federal unemployment account to the account of any State in the Unemployment Trust Fund the amounts certified under subsection (a) by the Secretary of Labor (but not exceeding that portion of the balance in the Federal unemployment account at the time of such transfer which is not restricted as to use pursuant to section 903(b)). Any amount so transferred shall be an advance which shall be repaid (without interest) by the State to the Federal unemployment account in the manner provided in subsections (a) and (b)(1) of section 1202.

SEC. 1202. (a) The Governor of any State may at any time request that funds be transferred from the account of such State to the Federal unemployment account in repayment of part or all of any remaining balance of advances made to such State under section 1201. The Secretary of Labor shall certify to the Secretary of the Treasury the amount stated in such request; and the Secretary of the Treasury shall promptly transfer such amount.

(b)(1) There are hereby appropriated to the Unemployment Trust Fund for credit to the Federal unemployment account, out of any moneys in the Treasury not otherwise appropriated, amounts equal to the amounts by which (A) 100 per centum of the additional tax received under the Federal Unemployment Tax Act by reason of the reduced credits provisions of section 1601(c)(2) of such Act and covered into the Treasury, exceeds (B) the amounts appropriated by paragraph (2). Any amount so appropriated shall be credited against, and shall operate to reduce, the remaining balance of advances under section 1201 to the State with respect to which employers paid such additional tax.

(2) Whenever the amount of such additional tax paid, received, and covered into the Treasury exceeds the remaining balance of advances under section 1201 to the State, there is hereby appropriated to the Unemployment Trust Fund for credit to the account of such State, out of any moneys in the Treasury not otherwise appropriated, an amount equal to such excess.

(3) The amounts appropriated by paragraphs (1) and (2) shall be transferred at the close of the month in which the moneys were covered into the Treasury to the Unemployment Trust Fund for credit to the Federal unemployment account or to the account of the State, as the case may be, as of the first day of the succeeding month.

(c) There are hereby authorized to be appropriated to the Federal unemployment account, as repayable advances (without interest), such sums as may be necessary to carry out the purposes of this title.

SEC. 1203. When used in this title, the term "Governor" shall include the Commissioners of the District of Columbia.

---

**Provisions of the Social Security Act as in Effect Prior to  
P.L. 87-64, Approved June 30, 1961 (75 Stat. 131)  
Social Security Amendments of 1961**

**SEC. 202.**

(b)(1)

(C) is not entitled to old-age or disability insurance benefits, or is entitled to old-age or disability insurance benefits based on a primary insurance amount which is less than one-half of an old-age or disability insurance benefit of her husband,

(c)(1)

(D) is not entitled to old-age or disability insurance benefits, or is entitled to old-age or disability insurance benefits each of which is less than one-half of the primary insurance amount of his wife,

(e)

(2) Such widow's insurance benefit for each month shall be equal to three-fourths of the primary insurance amount of her deceased husband.

(f)

(3) Such widower's insurance benefit for each month shall be equal to three-fourths of the primary insurance amount of his deceased wife.

(h)

(2) Such parent's insurance benefit for each month shall be equal to three-fourths of the primary insurance amount of such deceased individual.



(j)

(3) Notwithstanding the provisions of paragraph (1), a woman may, at her option, waive entitlement to old-age insurance benefits or wife's insurance benefits for any one or more consecutive months which occur—

(A) after the month before the month in which she attains the age of sixty-two,

(B) prior to the month in which she attains the age of sixty-five, and

(C) prior to the month in which she files application for such benefit;

and, in such case, she shall not be considered as entitled to such benefits for any such month or months before she filed such application. A woman shall be deemed to have waived such entitlement for any such month for which such benefit would, under the second sentence of paragraph (1), be reduced to zero.

#### Adjustment of Old-Age and Wife's Insurance Benefit Amounts in Accordance With Age of Female Beneficiary

(q)(1) The old-age insurance benefit of any woman for any month prior to the month in which she attains the age of sixty-five shall be reduced by—

(A)  $5/9$  of 1 per centum, multiplied by

(B) the number equal to the number of months in the period beginning with the first day of the first month for which she is entitled to an old-age insurance benefit and ending with the last day of the month before the month in which she would attain the age of sixty-five.

(2) The wife's insurance benefit of any wife for any month after the month preceding the month in which she attains the age of sixty-two and prior to the month in which she attains the age of sixty-five shall be reduced by—

(A)  $25/36$  of 1 per centum, multiplied by

(B) the number equal to the number of months in the period beginning with the first day of the first month for which she is entitled to such wife's insurance benefit and ending with the last day of the month before the month in which she would attain the age of sixty-five, except that in no event shall such period start earlier than the first day of the month in which she attains the age of sixty-two.

The preceding provisions of this paragraph shall not apply to the benefit for any month in which such wife has in her care (individually or jointly with the individual on whose wages and self-employment income such wife's insurance benefit is based) a child entitled to child's insurance benefits on the basis of such wages and self-employment income. With respect to any month in the period specified in clause (B) of the first sentence, if such wife does not have in such month such a child in her care (individually or jointly with such individual), she shall be deemed to have such a child in her care in such month for the purposes of the preceding sentence unless there is in effect for such month a certificate filed by her with the Secretary, in accordance with regulations prescribed by him, in which she elects to receive wife's insurance benefits reduced as provided in this subsection. Any certificate filed pursuant to the preceding sentence shall be effective for purposes of such sentence—

(i) for the month in which it is filed, and for any month thereafter, if in such months she does not have such a child in her care (individually or jointly with such individual), and

(ii) for the period of one or more consecutive months (not exceeding twelve) immediately preceding the month in which such certificate is filed which is designated by her (not including as part of such period any month in which she had such a child in her care (individually or jointly with such individual)).

If such a certificate is filed, the period referred to in clause (B) of the first sentence of this paragraph shall commence with the first day of the first month (i) for which she is entitled to a wife's insurance benefit, (ii) which occurs after the month preceding the month in which she attained the age of sixty-two, and (iii) for which such certificate is effective.

(3) In the case of any woman who is entitled to an old-age insurance benefit to which paragraph (1) is applicable and who, for the first month for which she is so entitled (but not for any prior month) or for any later month occurring before the month in which she attains the age of sixty-five, is entitled to a wife's insurance benefit to which paragraph (2) is applicable, the amount of such wife's insurance benefit for any month prior to the month in which she attains the age of sixty-five shall, in lieu of the reduction provided in paragraph (2), be reduced by the sum of—

(A) an amount equal to the amount by which such old-age insurance benefit for such month is reduced under paragraph (1), plus

(B) an amount equal to—

(i) the number equal to the number of months specified in clause (B) of paragraph (2), multiplied by

(ii)  $25/36$  of 1 per centum, and further multiplied by



(iii) the excess of such wife's insurance benefit prior to reduction under this subsection over the old-age insurance benefit prior to reduction under this subsection.

(4) In the case of any woman who is or was entitled to a wife's insurance benefit to which paragraph (2) is applicable and who, for any month after the first month for which she is or was so entitled (but not for such first month or any earlier month) occurring before the month in which she attains the age of sixty-five, is entitled to an old-age insurance benefit, the amount of such old-age insurance benefit for any month prior to the month in which she attains the age of sixty-five shall, in lieu of the reduction provided in paragraph (1), be reduced by the sum of—

(A) an amount equal to the amount by which such wife's insurance benefit is reduced under paragraph (2) for such month (or, if she is not entitled to a wife's insurance benefit for such month, by an amount equal to the amount by which such benefit was reduced for the last month for which she was entitled thereto), plus

(B) if the old-age insurance benefit for such month prior to reduction under this subsection exceeds such wife's insurance benefit prior to reduction under this subsection, an amount equal to—

(i) the number equal to the number of months specified in clause (B) of paragraph (1), multiplied by

(ii)  $\frac{5}{9}$  of 1 per centum, and further multiplied by

(iii) the excess of such old-age insurance benefit over such wife's insurance benefit.

(5) In the case of any woman who is entitled to an old-age insurance benefit for the month in which she attains the age of sixty-five or any month thereafter, such benefit for such month shall, if she was also entitled to such benefit for any one or more months prior to the month in which she attained the age of sixty-five and such benefit for any such prior month was reduced under paragraph (1) or (4), be reduced as provided in such paragraph, except that there shall be subtracted, from the number specified in clause (B) of such paragraph—

(A) the number equal to the number of months for which such benefit was reduced under such paragraph, but for which such benefit was subject to deductions under section 203(b) or paragraph (1) of section 203(c), and except that, in the case of any such benefit reduced under paragraph (4), there also shall be subtracted from the number specified in clause (B) of paragraph (2), for the purpose of computing the amount referred to in clause (A) of paragraph (4)—

(B) the number equal to the number of months for which the wife's insurance benefit was reduced under such paragraph (2), but for which such benefit was subject to deductions under section 203(b), under section 203(c)(1), under section 203(d)(1) or under section 222(b),

(C) the number equal to the number of months occurring after the first month for which such wife's insurance benefit was reduced under such paragraph (2) in which she had in her care (individually or jointly with the individual on whose wages and self-employment income such benefit is based) a child of such individual entitled to child's insurance benefits, and

(D) the number equal to the number of months for which such wife's insurance benefit was reduced under such paragraph (2), but in or after which her entitlement to wife's insurance benefits was terminated because her husband ceased to be under a disability, not including in such number of months any month after such termination in which she was entitled to wife's insurance benefits.

Such subtraction shall be made only if the total of such months specified in clauses (A), (B), (C), and (D) of the preceding sentence is not less than three. For purposes of clauses (B) and (C) of this paragraph, a wife's insurance benefit shall not be considered terminated for any reason prior to the month in which she attains the age of sixty-five.

(6) In the case of any woman who is entitled to a wife's insurance benefit for the month in which she attains the age of sixty-five or any month thereafter, such benefit for such month shall, if she was also entitled to such benefit for any one or more months prior to the month in which she attained the age of sixty-five and such benefit for any such prior month was reduced under paragraph (2) or (3), be reduced as provided in such paragraph, except that there shall be subtracted from the number specified in clause (B) of such paragraph—

(A) the number equal to the number of months for which such benefit was reduced under such paragraph, but for which such benefit was subject to deductions under section 203(b), under section 203(c)(1), under section 203(d)(1), or under section 222(b),

<sup>1</sup>As in original. One "be" should be stricken.

(B) the number equal to the number of months, occurring after the first month for which such benefit was reduced under such paragraph, in which she had in her care (individually or jointly with the individual on whose wages and self-employment income such benefit is based) a child of such individual entitled to child's insurance benefits, and

(C) the number equal to the number of months for which such benefit was reduced under such paragraph, but in or after which her entitlement to wife's insurance benefits was terminated because her husband ceased to be under a disability, not including in such number of months any month after such termination in which she was entitled to wife's insurance benefits,

and except that, in the case of any such benefit reduced under paragraph (3), there also shall be subtracted from the number specified in clause<sup>2</sup> B) of paragraph (1), for the purpose of computing the amount referred to in clause (A), of paragraph (3)—

(D) the number equal to the number of months for which the old-age insurance benefit was reduced under such paragraph (1) but for which such benefit was subject to deductions under section 203(b) or paragraph (1) of section 203(c).

Such subtraction shall be made only if the total of such months specified in clauses (A), (B), (C), and (D) of the preceding sentence is not less than three.

(7) In the case of a woman who is entitled to an old-age insurance benefit to which paragraph (5) is applicable and who, for the month in which she attains the age of sixty-five (but not for any prior month) or for any later month, is entitled to a wife's insurance benefit, the amount of such wife's insurance benefit for any month shall be reduced by an amount equal to the amount by which the old-age insurance benefit is reduced under paragraph (5) for such month.

(8) In the case of a woman who is or was entitled to a wife's insurance benefit to which paragraph (2) was applicable and who, for the month in which she attains the age of sixty-five (but not for any prior month) or for any later month, is entitled to an old-age insurance benefit, the amount of such old-age insurance benefit for any month shall be reduced by an amount equal to the amount by which the wife's insurance benefit is reduced under paragraph (6) for such month (or, if she is not entitled to a wife's insurance benefit for such month, by (i) an amount equal to the amount by which such benefit for the last month for which she was entitled thereto was reduced, or (ii) if smaller, an amount equal to the amount by which such benefit would have been reduced under paragraph (6) for the month in which she attained the age of sixty-five if entitlement to such benefit had not terminated before such month).

(9) The preceding paragraphs shall be applied to old-age insurance benefits and wife's insurance benefits after reduction under section 203(a) and application of section 215(g). If the amount of any reduction computed under paragraph (1), under paragraph (2), under clause (A) or clause (B) of paragraph (3), or under clause (A) or clause (B) of paragraph (4) is not a multiple of \$0.10, it shall be reduced to the next lower multiple of \$0.10.

#### Presumed Filing of Application by Woman Eligible for Old-Age and Wife's Insurance Benefits

(r) Any woman who becomes entitled to an old-age insurance benefit for any month prior to the month in which she attains the age of sixty-five and who is eligible for a wife's insurance benefit for the same month shall be deemed to have filed an application in such month for wife's insurance benefits. Any woman who becomes entitled to a wife's insurance benefit for any month prior to the month in which she attains the age of sixty-five and who is eligible for an old-age insurance benefit for the same month shall be deemed, unless she has in such month a child in her care (individually or jointly with the individual on whose wages and self-employment income her wife's insurance benefits are based) a child entitled to child's insurance benefits on the basis of such wages and self-employment income, to have filed an application in such month for old-age insurance benefits. For purposes of this subsection an individual shall be deemed eligible for a benefit for a month if, upon filing application therefor in such month, she would have been entitled to such benefit for such month.

#### Female Disability Insurance Beneficiary

(s)(1) If any woman becomes entitled to a widow's insurance benefit or parent's insurance benefit for a month before the month in which she attains the age of sixty-five, or becomes entitled to an old-age insurance benefit or wife's insurance benefit for a month before the month in which she attains the age of sixty-five which is reduced under the provisions of subsection (q), such individual may not thereafter become entitled to disability insurance benefits under this title.

<sup>2</sup>As in original. Should be a beginning parenthesis.



(2) If a woman would, but for the provisions of subsection (k)(2)(B), be entitled for any month to a disability insurance benefit and to a wife's insurance benefit, subsection (q) shall be applicable to such wife's insurance benefit for such month only to the extent it exceeds such disability insurance benefit for such month.

(3) The entitlement of any woman to disability insurance benefits shall terminate with the month before the month in which she becomes entitled to old-age insurance benefits.

#### SEC. 214.

##### Fully Insured Individual

(a) The term "fully insured individual" means any individual who had not less than—

(1) one quarter of coverage (whenever acquired) for each three of the quarters lapsing—

(A) after (i) December 31, 1950, or (ii) if later, December 31 of the year in which he attained the age of twenty-one, and

(B) prior to (i) the year in which he died, or (ii) if earlier, the year in which he attained retirement age,

except that in no case shall an individual be a fully insured individual unless he has at least six quarters of coverage; or

(2) forty quarters of coverage; or

(3) in the case of an individual who died prior to 1951, six quarters of coverage; not counting as an elapsed quarter for purposes of paragraph (1) any quarter any part of which was included in a period of disability (as defined in section 216(i)) unless such quarter was a quarter of coverage. When the number of elapsed quarters referred to in paragraph (1) is not a multiple of three, such number shall, for purposes of such paragraph, be reduced to the next lower multiple of three.

#### SEC. 215.

(a) (4) In the case of an individual who was entitled to a disability insurance benefit for the month before the month in which he became entitled to old-age insurance benefits or died, the amount in column IV which is equal to his disability insurance benefit.

(b) (3) For the purposes of paragraph (2), an individual's "elapsed years" shall be the number of calendar years—

(A) after (i) December 31, 1950, or (ii) if later, December 31 of the year in which he attained the age of twenty-one, and

(B) prior to (i) the year in which he died, or (ii) if earlier, the first year after December 31, 1960, in which he both was fully insured and had attained retirement age.

For the purposes of the preceding sentence, any calendar year any part of which was included in a period of disability shall not be included in such number of calendar years.

#### SEC. 216.

##### Retirement Age

(a) The term "retirement age" means—

(1) in the case of a man, age sixty-five, or

(2) in the case of a woman, age sixty-two.

#### Provisions of the Social Security Act as in Effect Prior to

P.L. 87-543, Approved July 25, 1962 (76 Stat. 172)

Public Welfare Amendments of 1962

#### SEC. 3. (a)

(1) in the case of any State other than Puerto Rico, the Virgin Islands, and Guam, an amount equal to the sum of the following proportions of the total amounts expended during such quarter as old-age assistance under the State plan (including expenditures for insurance premiums for medical or any other type of remedial care or the cost thereof—

(A) four-fifths of such expenditures, not counting so much of any expenditure with respect to any month as exceeds the product of \$31 multiplied by the total number of recipients of old-age assistance for such month (which



total number, for purposes of this subsection, means (i) the number of individuals who received old-age assistance in the form of money payments for such month, plus (ii) the number of other individuals with respect to whom expenditures were made in such month as old-age assistance in the form of medical or any other type of remedial care; plus

(B) the Federal percentage (as defined in section 1101(a)(8)) of the amount by which such expenditures exceed the maximum which may be counted under clause (A), not counting so much of any expenditure with respect to any month as exceeds the product of \$66 multiplied by the total number of such recipients of old-age assistance for such month; plus

(C) the larger of the following: (i) the Federal medical percentage (as defined in section 6(c)) of the amount by which such expenditures exceed the maximum which may be counted under clause (B), not counting so much of any expenditure with respect to any month as exceeds (I) the product of \$81 multiplied by the total number of such recipients of old-age assistance for such month, or (II) if smaller, the total expended as old-age assistance in the form of medical or any other type of remedial care with respect to such month plus the product of \$66 multiplied by such total number of such recipients, or (ii) 15 per centum of the total of the sums expended during such quarter as old-age assistance under the State plan in the form of medical or any other type of remedial care, not counting so much of any expenditure with respect to any month as exceeds the product of \$15 multiplied by the total number of such recipients of old-age assistance for such month; and

(2) in the case of Puerto Rico, the Virgin Islands, and Guam, an amount equal to—

(A) one-half of the total of the sums expended during such quarter as old-age assistance under the State plan (including expenditures for insurance premiums for medical or any other type of remedial care or the cost thereof), not counting so much of any expenditure with respect to any month as exceeds \$35.50 multiplied by the total number of recipients of old-age assistance for such month; plus

(B) the larger of the following amounts: (i) one-half of the amount by which such expenditures exceed the maximum which may be counted under clause (A), not counting so much of any expenditure with respect to any month as exceeds (I) the product of \$43 multiplied by the total number of such recipients of old-age assistance for such month, or (II) if smaller, the total expended as old-age assistance in the form of medical or any other type of remedial care with respect to such month plus the product of \$35.50 multiplied by the total number of such recipients, or (ii) 15 per centum of the total of the sums expended during such quarter as old-age assistance under the State plan in the form of medical or any other type of remedial care, not counting so much of any expenditure with respect to any month as exceeds the product of \$7.50 multiplied by the total number of such recipients of old-age assistance for such month; and

(4) in the case of any State, an amount equal to one-half of the total of the sums expended during such quarter as found necessary by the Secretary of Health, Education, and Welfare for the proper and efficient administration of the State plan, including services which are provided by the staff of the State agency (or of the local agency administering the State plan in the political subdivision) to applicants for and recipients of old-age assistance to help them attain self-care.

## TITLE IV—GRANTS TO STATES FOR AID TO DEPENDENT CHILDREN

### STATE PLANS FOR AID TO DEPENDENT CHILDREN

SEC. 402. (a) (7) provide that the State agency shall, in determining need, take into consideration any other income and resources of any child claiming aid to families with<sup>1</sup> dependent children;

SEC. 403. (a) From the sums appropriated therefor, the Secretary of the Treasury shall pay to each State which has an approved plan for aid to dependent children, for each quarter, beginning with the quarter commencing October 1, 1958, (1) in the case of any State other than Puerto Rico, the Virgin Islands, and Guam, an amount equal to the sum of the following proportions of the total amounts expended during such quarter as aid to dependent children under the State plan (including expenditures for

<sup>1</sup>P.L. 87-543, §104(a)(3)(A), inserted "families with".

insurance premiums for medical or any other type of remedial care or the cost thereof—

(A) fourteen-seventeenths of such expenditures, not counting so much of any expenditure with respect to any month as exceeds the product of \$17 multiplied by the total number of recipients of aid to dependent children for such month (which total number, for purposes of this subsection, means (i) the number of individuals with respect to whom aid to dependent children in the form of money payments is paid for such month, plus (ii) the number of other individuals with respect to whom expenditures were made in such month as aid to dependent children in the form of medical or any other type of remedial care); plus

(B) the Federal percentage of the amount by which such expenditures exceed the maximum which may be counted under clause (A), not counting so much of any expenditure with respect to any month as exceeds the product of \$30 multiplied by the total number of recipients of aid to dependent children for such month;

and (2) in the case of Puerto Rico, the Virgin Islands, and Guam, an amount equal to one-half of the total of the sums expended during such quarter as aid to dependent children under the State plan (including expenditures for insurance premiums for medical or any other type of remedial care or the cost thereof), not counting so much of any expenditure with respect to any month as exceeds \$18 multiplied by the total number of recipients of aid to dependent children for such month; and (3) in the case of any State, an amount equal to one-half of the total of the sums expended during such quarter as found necessary by the Secretary of Health, Education, and Welfare for the proper and efficient administration of the State plan, including services which are provided by the staff of the State agency (or of the local agency administering the State plan in the political subdivision) to relatives with whom such children (applying for or receiving such aid) are living, in order to help such relatives attain self-support or self-care, or which are provided to maintain and strengthen family life for such children.

#### ADMINISTRATION

SEC. 405. There is hereby authorized to be appropriated for the fiscal year ending June 30, 1936, the sum of \$250,000 for all necessary expenses of the Board in administering the provisions of this title.

#### SEC. 408.

(a) (2) for whose placement and care the State or local agency administering the State plan approved under section 402 is responsible,

#### SEC. 705.

(b) From the sums appropriated pursuant to subsection (a), the Secretary shall make allotments to the States on the basis of (1) population, (2) relative need for trained public welfare personnel, particularly for personnel to provide self-support and self-care services, and (3) financial need.

SEC. 1003. (a) From the sums appropriated therefor, the Secretary of the Treasury shall pay to each State which has an approved plan for aid to the blind, for each quarter, beginning with the quarter commencing October 1, 1958, (1) in the case of any State other than Puerto Rico, the Virgin Islands, and Guam, an amount equal to the sum of the following proportions of the total amounts expended during such quarter as aid to the blind under the State plan (including expenditures for insurance premiums for medical or any other type of remedial care or the cost thereof)—

(A) four-fifths of such expenditures, not counting so much of any expenditure with respect to any month as exceeds the product of \$31 multiplied by the total number of recipients of aid to the blind for such month (which total number, for purposes of this subsection, means (i) the number of individuals who received aid to the blind in the form of money payments for such month, plus (ii) the number of other individuals with respect to whom expenditures were made in such month as aid to the blind in the form of medical or any other type of remedial care); plus

(B) the Federal percentage of the amount by which such expenditures exceed the maximum which may be counted under clause (A), not counting so much of any expenditure with respect to any month as exceeds the product of \$66 multiplied by the total number of such recipients of aid to the blind for such month;

and (2) in the case of Puerto Rico, the Virgin Islands, and Guam, an amount equal to one-half of the total of the sums expended during such quarter as aid to the blind under the State plan (including expenditures for insurance premiums for medical or any other type of remedial care or the cost thereof), not counting so much of any expenditure with respect to any month as exceeds \$35.50 multiplied by the total



number of recipients of aid to the blind for such month; and (3) in the case of any State, an amount equal to one-half of the total of the sums expended during such quarter as found necessary by the Secretary of Health, Education, and Welfare for the proper and efficient administration of the State plan, including services which are provided by the staff of the State agency (or of the local agency administering the State plan in the political subdivision) to applicants for and recipients of aid to the blind to help them attain self-support or self-care.

LIMITATION ON PAYMENTS TO PUERTO RICO, THE VIRGIN ISLANDS, AND  
GUAM

SEC. 1108. The total amount certified by the Administrator under titles I (other than section 3(a)(3) thereof), IV, X, and XIV, for payment to Puerto Rico with respect to any fiscal year shall not exceed \$9,000,000<sup>2</sup>, of which \$500,000<sup>3</sup> may be used only for payments certified with respect to section 3(a)(2)(B); the total amount certified by the Administrator under such titles for payment to the Virgin Islands with respect to any fiscal year shall not exceed \$315,000<sup>4</sup>, of which \$15,000<sup>5</sup> may be used only for payments certified in respect to section 3(a)(2)(B); and the total amount certified by the Secretary under such titles for payment to Guam with respect to any fiscal year shall not exceed \$420,000<sup>6</sup>, of which \$20,000<sup>7</sup> may be used only for payments certified in respect to section 3(a)(2)(B). Notwithstanding the provisions of sections 502(a)(2), 512(a)(2), and 522(a), and until such time as the Congress may by appropriation or other law otherwise provide, the Secretary shall, in lieu of the \$60,000, \$60,000, and \$60,000, respectively, specified in such sections, allot such smaller amounts to Guam as he may deem appropriate.

SEC. 1403. (a) From the sums appropriated therefor, the Secretary of the Treasury shall pay to each State which has an approved plan for aid to the permanently and totally disabled, for each quarter, beginning with the quarter commencing October 1, 1958, (1) in the case of any State other than Puerto Rico, the Virgin Islands, and Guam, an amount equal to the sum of the following proportions of the total amounts expended during such quarter as aid to the permanently and totally disabled under the State plan (including expenditures for insurance premiums for medical or any other type of remedial care or the cost thereof)—

(A) four-fifths of such expenditures, not counting so much of any expenditure with respect to any month as exceeds the product of \$31 multiplied by the total number of recipients of aid to the permanently and totally disabled for such month (which total number, for purposes of this subsection, means (i) the number of individuals who received aid to the permanently and totally disabled in the form of money payments for such month, plus (ii) the number of other individuals with respect to whom expenditures were made in such month as aid to the permanently and totally disabled in the form of medical or any other type of remedial care); plus

(B) the Federal percentage of the amount by which such expenditures exceed the maximum which may be counted under clause (A), not counting so much of any expenditure with respect to any month as exceeds the product of \$66 multiplied by the total number of such recipients of aid to the permanently and totally disabled for such month;

and (2) in the case of Puerto Rico, the Virgin Islands, and Guam, an amount equal to one-half of the total of the sums expended during such quarter as aid to the permanently and totally disabled under the State plan (including expenditures for insurance premiums for medical or any other type of remedial care or the cost thereof), not counting so much of any expenditure with respect to any month as

<sup>2</sup>P.L. 87-31, §6(a), struck out "\$9,000,000" and substituted: (1) "9,075,000" effective for fiscal year ending June 30, 1961; (2) "\$9,425,000" effective for fiscal year ending June 30, 1962; and (3) "\$9,125,000" effective for fiscal years ending after June 30, 1962.

<sup>3</sup>P.L. 87-64, §303(d), struck out "\$9,425,000" and substituted "\$9,500,000", effective only for fiscal year ending June 30, 1962.

<sup>4</sup>P.L. 87-543, §132(d), repealed §6 of P.L. 87-31 and §303(d) of P.L. 87-64, effective with respect to fiscal years beginning after June 30, 1962.

<sup>5</sup>P.L. 87-31, §6(b), struck out "\$500,000" and substituted "\$625,000", effective for fiscal years ending after June 30, 1961.

<sup>6</sup>P.L. 87-543, §132(d), repealed §6 of P.L. 87-31, effective with respect to fiscal years beginning after June 30, 1962.

<sup>7</sup>P.L. 87-31, §6(b), struck out "\$315,000" and substituted "\$318,750".

P.L. 87-64, §303(d), struck out "\$318,750" and substituted "\$320,000".

P.L. 87-543, §132(d), repealed §6 of P.L. 87-31 and §303(d) of P.L. 87-64.

<sup>8</sup>P.L. 87-31, §6(b), struck out "\$15,000" and substituted "\$18,750".

P.L. 87-543, §132(d), repealed §6 of P.L. 87-31.

<sup>9</sup>P.L. 87-31, §6(b), struck out "\$420,000" and substituted "\$425,000".

P.L. 87-64, §303(d), struck out "\$425,000" and substituted "\$430,000".

P.L. 87-543, §132(d), repealed §6 of P.L. 87-31, and §303(d) of P.L. 87-64.

<sup>10</sup>P.L. 87-31, §6(b), struck out "\$20,000" and substituted "\$25,000".

P.L. 87-543, §132(d), repealed §6 of P.L. 87-31.



exceeds \$35.50 multiplied by the total number of recipients of aid to the permanently and totally disabled for such month; and (3) in the case of any State, an amount equal to one-half of the total of the sums expended during such quarter as found necessary by the Secretary of Health, Education, and Welfare for the proper and efficient administration of the State plan, including services which are provided by the staff of the State agency (or of the local agency administering the State plan in the political subdivision) to applicants for and recipients of aid to the permanently and totally disabled to help them attain self-support or self-care.

**Provisions of the Social Security Act as in Effect Prior to  
P.L. 88-156, Approved October 24, 1963 (77 Stat. 273)**

**Maternal and Child Health and Mental Retardation Planning Amendments of 1963**

SEC. 502. (a)(1) Out of the sums appropriated pursuant to section 501 for the fiscal year ending June 30, 1951, the Federal Security Administrator shall allot \$7,500,000 as follows: He shall allot to each State \$60,000 and shall allot each State such part of the remainder of the \$7,500,000 as he finds that the number of live births in such State bore to the total number of live births in the United States, in the latest calendar year for which the Administrator has available statistics.

(2) Out of the sums appropriated pursuant to section 501 for each fiscal year beginning after June 30, 1960, the Secretary shall allot \$12,500,000 as follows: He shall allot to each State \$70,000 (even though the amount appropriated for such year is less than \$25,000,000), and shall allot each State such part of the remainder of the \$12,500,000 as he finds that the number of live births in such State bore to the total number of live births in the United States, in the latest calendar year for which the Administrator has available statistics.

SEC. 512. (a)(1) Out of the sums appropriated pursuant to section 511 for the fiscal year ending June 30, 1951, the Federal Security Administrator shall allot \$6,000,000 as follows: He shall allot to each State \$60,000, and shall allot the remainder of the \$6,000,000 to the States according to the need of each State as determined by him after taking into consideration the number of crippled children in such State in need of the services referred to in section 511 and the cost of furnishing such services to them.

**PART 4—VOCATIONAL REHABILITATION**

SEC. 531. (a) In order to enable the United States to cooperate with the States and Hawaii in extending and strengthening their programs of vocational rehabilitation of the physically disabled, and to continue to carry out the provisions and purposes of the Act entitled "An Act to provide for the promotion of vocational rehabilitation of persons disabled in industry or otherwise and their return to civil employment", approved June 2, 1920, as amended (U.S.C., title 29, ch. 4; U. S. C., Supp. VII, title 29, secs. 31, 32, 34, 35, 37, 39, and 40), there is hereby authorized to be appropriated for the fiscal years ending June 30, 1936, and June 30, 1937, the sum of \$841,000 for each such fiscal year in addition to the amount of the existing authorization, and for each fiscal year thereafter the sum of \$3,500,000. Of the sums appropriated pursuant to such authorization for each fiscal year, \$15,000 shall be apportioned to the Territory of Hawaii and the remainder shall be apportioned among the several States in the manner provided in such Act of June 2, 1920, as amended: *Provided*, That the amount of such sums apportioned to any State for any fiscal year shall be not less than \$20,000.

(b) For the administration of such Act of June 2, 1920, as amended, by the Federal agency authorized to administer it, there is hereby authorized to be appropriated for the fiscal years ending June 30, 1936, and June 30, 1937, the sum of \$22,000 for each such fiscal year in addition to the amount of the existing authorization.<sup>1</sup> and for each fiscal year thereafter the sum of \$150,000.

<sup>1</sup>As in original. Period should be deleted.

**SUPERSEDED PROVISIONS—SOCIAL SECURITY ACT**  
**Provisions of the Social Security Act as in Effect Prior to**  
**P.L. 88-272, Approved February 26, 1964 (78 Stat. 19)**  
**Revenue Act of 1964**

**SEC. 209.**

(e) Any payment made to, or on behalf of, an employee or his beneficiary (1) from or to a trust exempt from tax under section 165(a) of the Internal Revenue Code at the time of such payment unless such payment is made to an employee of the trust as remuneration for services rendered as such employee and not as a beneficiary of the trust, or (2) under or to an annuity plan which, at the time of such payment, meets the requirements of section 165(a)(3), (4), (5), and (6) of such code;

**SEC. 211.**

(a)

(3) (B) from the cutting of timber, or the disposal of timber or coal, if section 117(j) of such code is applicable to such gain or less,

**Provisions of the Social Security Act as in Effect Prior to**  
**P.L. 88-650, Approved October 13, 1964 (78 Stat. 1075)**  
**[Social Security Act Amendments - 1964]**

**SEC. 216.**

(i)

(2) Except as provided in paragraph (4), a period of disability shall (subject to section 223(a)) begin—

(A) if the individual satisfies the requirements of paragraph (3) on such day,

(i) on the day the disability began, or

(ii) on the first day of the eighteen-month period which ends with the day before the day on which the individual files such application, whichever occurs later;

(B) if such individual does not satisfy the requirements of paragraph (3) on the day referred to in subparagraph (A), then on the first day of the first quarter thereafter in which he satisfies such requirements.

(4) If an individual files an application for a disability determination after December 1954, and before July 1962, with respect to a disability which began before January 1961, and continued without interruption until such application was filed, then the beginning day for the period of disability shall be—

(A) the day such disability began, but only if he satisfies the requirements of paragraph (3) on such day;

(B) if he does not satisfy such requirements on such day, the first day of the first quarter thereafter in which he satisfies such requirements.

**SEC. 1002. (a)** (8) provide that the agency shall, in determining need, take into consideration any other income and resources of the individual claiming aid to the blind, as well as any expenses reasonably attributable to the earning of any such income; except that, in making such determination, the State agency shall disregard (A) the first \$85 per month of earned income, plus one-half of earned income in excess of \$85 per month, and (B) for a period not in excess of twelve months, such additional amounts of other income and resources, in the case of an individual who has a plan for achieving self-support approved by the State agency, as may be necessary for the fulfillment of such plan;

**SEC. 1602. (a)**

(14) provide that the State agency shall, in determining need for aid to the aged, blind, or disabled, take into consideration any other income and resources of an individual claiming such aid, as well as any expenses reasonably attributable to the earning of any such income; except that, in making such determination with respect to any individual who is blind, the State agency shall disregard (A) the first \$85 per month of earned income plus one-half of earned income in excess of \$85 per month and (B) for a period not in excess of twelve months, such additional amounts of other income and resources, in the case of an individual who has a plan for achieving self-support approved by the State agency, as may be necessary for the fulfillment of such plan, and in making such determination with respect to any other individual who has attained age 65 and is claiming aid to the aged, blind, or disabled, of the first \$50 per month of earned income the State agency may, after December 31, 1962, disregard not more than the first \$10 thereof plus one-half of the remainder; and



**Provisions of the Social Security Act as in Effect Prior to  
P.L. 89-97, Approved July 30, 1965 (79 Stat. 286)  
Social Security Amendments of 1965**

**SEC. 3. (a)**

(1)

(B) the Federal percentage (as defined in section 1101(a)(8)) of the amount by which such expenditures exceed the maximum which may be counted under clause (A), not counting so much of any expenditure with respect to any month as exceeds the product of \$70 multiplied by the total number of such recipients of old-age assistance for such month; plus

(C) the larger of the following: (i) the Federal medical percentage (as defined in section 6(c) of the amount by which such expenditures exceed the maximum which may be counted under clause (B), not counting so much of any expenditure with respect to any month as exceeds (I) the product of \$85 multiplied by the total number of such recipients of old-age assistance for such month, or (II) if smaller, the total expended as old-age assistance in the form of medical or any other type of remedial care with respect to such month plus the product of \$70 multiplied by such total number of such recipients, or (ii) 15 per centum of the total of the sums expended during such quarter as old-age assistance under the State plan in the form of medical or any other type of remedial care, not counting so much of any expenditure with respect to any month as exceeds the product of \$15 multiplied by the total number of such recipients of old-age assistance for such month;

**SEC. 6. (a)** For the purposes of this title, the term "old-age assistance" means money payments to, or (if provided in or after the third month before the month in which the recipient makes application for assistance) medical care in behalf of or any type of remedial care recognized under State law in behalf of, needy individuals who are sixty-five years of age or older, but does not include—

(1) any such payments to or care in behalf of any individual who is an inmate of a public institution (except as a patient in a medical institution) or any individual who is a patient in an institution for tuberculosis or mental diseases, or

(2) any such payments to any individual who has been diagnosed as having tuberculosis or psychosis and is a patient in a medical institution as a result thereof, or

(3) any such care in behalf of any individual, who is a patient in a medical institution as a result of a diagnosis that he has tuberculosis or psychosis, with respect to any period after the individual has been a patient in such an institution, as a result of such diagnosis, for forty-two days.

(b)

(A) care or services for any individual who is an inmate of a public institution (except as a patient in a medical institution) or any individual who is a patient in an institution for tuberculosis or mental diseases; or

(B) care or services for any individual, who is a patient in a medical institution as a result of a diagnosis of tuberculosis or psychosis, with respect to any period after the individual has been a patient in such an institution, as a result of such diagnosis, for forty-two days.

**SEC. 201. (g)(1)** The Managing Trustee is directed to pay from the Trust Funds into the Treasury the amounts estimated by him and the Secretary of Health, Education, and Welfare which will be expended, out of moneys appropriated from the general funds in the Treasury, during a three-month period by the Department of Health, Education, and Welfare and the Treasury Department for the administration of titles II and VIII of this Act and subchapter E of chapter 1 and subchapter A of chapter 9 of the Internal Revenue Code of 1939, and chapters 2 and 21 of the Internal Revenue Code of 1954. Such payments shall be covered into the Treasury as repayments to the account for reimbursement of expenses incurred in connection with the administration of titles II and VIII of this Act and subchapter E of chapter 1 and subchapter A of chapter 9 of the Internal Revenue Code of 1939, and chapters 2 and 21 of the Internal Revenue Code of 1954. There are hereby authorized to be made available for expenditure, out of either or both of the Trust Funds, such amounts as the Congress may deem appropriate to pay the costs of administration of this title. After the close of each fiscal year, the Secretary of Health, Education, and Welfare shall analyze the costs of administration of this title incurred during such fiscal year in order to determine the portion of such costs which should have been borne by each of the Trust Funds and shall certify to the Managing Trustee the amount, if any, which should be



transferred from one to the other of such Trust Funds in order to insure that each of the Trust Funds has borne its proper share of the costs of administration of this title incurred during such fiscal year. The Managing Trustee is authorized and directed to transfer any such amount from one to the other of such Trust Funds in accordance with any certification so made.

#### Sec. 202.

##### Wife's Insurance Benefits

(b)(1) The wife (as defined in section 216(b)) of an individual entitled to old-age or disability insurance benefits, if such wife—

(A) has filed application for wife's insurance benefits,

(B) has attained age 62 or has in her care (individually or jointly with her husband) at the time of filing such application a child entitled to a child's insurance benefit on the basis of the wages and self-employment income of her husband, and

(C) is not entitled to old-age or disability insurance benefits, or is entitled to old-age or disability insurance benefits based on a primary insurance amount which is less than one-half of the primary insurance amount of her husband, shall be entitled to a wife's insurance benefit for each month, beginning with the first month after August 1950 in which she becomes so entitled to such insurance benefits and ending with the month preceding the first month in which any of the following occurs: she dies, her husband dies, they are divorced a vinculo matrimonii, no child of her husband is entitled to a child's insurance benefit and she has not attained age 62, she becomes entitled to an old-age or disability insurance benefit based on a primary insurance amount which is equal to or exceeds one-half of the primary insurance amount of her husband, or her husband is not entitled to disability insurance benefits and is not entitled to old-age insurance benefits.

(2) Except as provided in subsection (q), such wife's insurance benefit for each month shall be equal to one-half of the primary insurance amount of her husband for such month.

(d)(1)

(B) at the time such application was filed was unmarried and either (i) had not attained the age of eighteen or (ii) was under a disability (as defined in section 223(c)) which began before he attained the age of eighteen, and

(e)(1) The widow (as defined in section 216(c)) of an individual who died a fully insured individual, if such widow—

(A) has not remarried,

(B) has attained age 62,

(C)(i) has filed application for widow's insurance benefits or was entitled, after attainment of age 62, to wife's insurance benefits, on the basis of the wages and self-employment income of such individual, for the month preceding the month in which he died, or

(ii) was entitled, on the basis of such wages and self-employment income, to mother's insurance benefits for the month preceding the month in which she attained age 62, and

(D) is not entitled to old-age insurance benefits, or is entitled to old-age insurance benefits each of which is less than  $82\frac{1}{2}$  percent of the primary insurance amount of her deceased husband,

shall be entitled to a widow's insurance benefit for each month, beginning with the first month after August 1950 in which she becomes so entitled to such insurance benefits and ending with the month preceding the first month in which any of the following occurs: she remarries, dies, or becomes entitled to an old-age insurance benefit equal to or exceeding  $82\frac{1}{2}$  percent of the primary insurance amount of her deceased husband.

(2) Such widow's insurance benefit for each month shall be equal to  $82\frac{1}{2}$  percent of the primary insurance amount of her deceased husband.

(3) In the case of any widow of an individual—

(A) who marries another individual, and

(B) whose marriage to the individual referred to in subparagraph (A) is terminated by his death which occurs within one year after such marriage and he did not die a fully insured individual,

the marriage to the individual referred to in clause (A) shall, for purposes of paragraph (1), be deemed not to have occurred. No benefits shall be payable under this subsection by reason of the preceding sentence for any month prior to whichever of the following is the latest: (i) the month in which the death referred to in subparagraph (B) of the preceding sentence occurs, (ii) the twelfth month before the month in which such widow files application for purposes of this paragraph, or (iii) November

(g)(1)

(F) in the case of a former wife divorced, was receiving from such individual (pursuant to agreement or court order) at least one-half of her support at the time of his death or, if such individual had a period of disability which did not end prior to the month in which he died, at the time such period began or at the time of such death, and the child referred to in subparagraph (E) is her son, daughter, or legally adopted child and the benefits referred to in such subparagraph are payable on the basis of such individual's wages and self-employment income.

(3) In the case of any widow or surviving divorced mother<sup>1</sup> of an individual—

(A) who marries another individual, and

(B) whose marriage to the individual referred to in subparagraph (A) is terminated by his death but she is not, and upon filing application therefor in the month in which he died would not be, entitled to benefits for such month on the basis of his wages and self-employment income,

the marriage to the individual referred to in clause (A) shall, for the purpose of paragraph (1), be deemed not to have occurred. No benefits shall be payable under this subsection by reason of the preceding sentence for any month prior to whichever of the following is the latest: (i) the month in which the death referred to in subparagraph (B) of the preceding sentence occurs, (ii) the twelfth month before the month in which such widow or surviving divorced mother<sup>2</sup> files application for purposes of this paragraph, or (iii) the month following the month in which this paragraph is enacted.

(j)

(2) No application for any benefit under this section for any month after August 1950 which is filed prior to three months before the first month for which the applicant becomes entitled to such benefit shall be accepted as an application for the purposes of this section; and any application filed within such three months' period shall be deemed to have been filed in such first month.

#### Extension of Period for Filing Proof of Support and Applications for Lump-Sum Death Payment

(p) In any case in which there is a failure—

(1) to file proof of support under subparagraph (C) of subsection (c)(1), clause (i) or (ii) of subparagraph (D) of subsection (f)(1), or subparagraph (B) of subsection (h)(1), or under clause (B) of subsection (f)(1) of this section as in effect prior to the Social Security Act Amendments of 1950 within the period prescribed by such subparagraph or clause, or

(2) to file, in the case of a death after 1946, application for a lump-sum death payment under subsection (i), or under subsection (g) of this section as in effect prior to the Social Security Act Amendments of 1950, within the period prescribed by such subsection,

and it is shown to the satisfaction of the Secretary that there was good cause for failure to file such proof or application, as the case may be, within such period, such proof or application shall be deemed to have been filed within such period if it is filed within two years following such period or within two years following August 1956, whichever is later. The determination of what constitutes good cause for purposes of this subsection shall be made in accordance with regulations of the Secretary.

#### Adjustment of Old-Age, Wife's, or Husband's Insurance Benefit Amounts in Accordance With Age of Beneficiary

(q)(1) If the first month for which an individual is entitled to an old-age, wife's, or husband's insurance benefit is a month before the month in which such individual attains age 65, the amount of such benefit for each month shall, subject to the succeeding paragraphs of this subsection, be reduced by—

(A)  $\frac{5}{9}$  of 1 percent of such amount if such benefit is an old-age insurance benefit, or  $\frac{25}{36}$  of 1 percent of such amount if such benefit is a wife's or husband's insurance benefit; multiplied by

(B)(i) the number of months in the reduction period for such benefit (determined under paragraph (5)), if such benefit is for a month before the month in which such individual attains age 65, or

(ii) the number of months in the adjusted reduction period for such benefit (determined under paragraph (6)), if such benefit is for the month in which such individual attains age 65 or for any other month thereafter.

<sup>1</sup>P.L. 89-97, §308(d)(5), struck out "former wife divorced" and substituted "surviving divorced mother".

<sup>2</sup>See footnote 1.



(3)

(C) For any month for which such individual is entitled to a disability insurance benefit, such individual's wife's or husband's insurance benefit shall be reduced by the amount by which such benefit would be reduced under paragraph (1) if it were equal to the excess of such benefit (before reduction under this subsection) over such disability insurance benefit.

## SEC. 203. (a)

(2) when any of such individuals was entitled (without the application of section 202(j)(1) and section 223(b)) to monthly benefits under section 202 or section 223 for December 1958, and the primary insurance amount of the insured individual on the basis of whose wages and self-employment income such monthly benefits are payable is determined under the provisions of section 215(a)(2), then such total benefits shall not be reduced to less than the larger of—

(A) the amount determined under this subsection without regard to this paragraph, or

(B) the amount determined under this subsection as in effect prior to the enactment of the Social Security Amendments of 1958 or the amount determined under section 102(h) of the Social Security Amendments of 1954, as the case may be, plus the excess of—

(i) the primary insurance amount of such insured individual in column IV of the table appearing in section 215(a), over

(ii) his primary insurance amount determined under section 215(c), or

(3) when any of such individuals is entitled (without the application of section 202(j)(1) and section 223(b)) to monthly benefits based on the wages and self-employment income of an insured individual with respect to whom a period of disability (as defined in section 216(i)) began prior to January 1959 and continued until—

(A) he became entitled to benefits under section 202 or 223, or

(B) he died, which ever<sup>3</sup> first occurred,

and the primary insurance amount of such insured individual is determined under the provisions of section 215(a)(1) or (3), then such total of benefits shall not be reduced to less than \$99.10 if such primary insurance amount is \$66, to less than \$102.40 if such primary insurance amount is \$67, to less than \$106.50 if such primary insurance amount is \$68, or, if such primary insurance amount is higher than \$68, to less than the smaller of—

(C) the amount determined under this subsection without regard to this paragraph, or \$206.60, whichever is larger, or

(D) the amount in column V of such table on the same line on which, in column IV, appears his primary insurance amount, plus the excess of—

(i) such primary insurance amount, over

(ii) the smaller amount in column II of the table on the line on which appears such primary insurance amount.

(f)

(5)

(B) In determining an individual's net earnings from self-employment and his net loss from self-employment for purposes of subparagraph (A) of this paragraph and paragraph (4), the provisions of section 211, other than paragraphs (1), (4), and (5) of subsection (c), shall be applicable; and any excess of income over deductions resulting from such a computation shall be his net earnings from self-employment and any excess of deductions over income so resulting shall be his net loss from self-employment.

## SEC. 205.

(n) The Administrator may, in his discretion, certify to the Managing Trustee any two or more individuals of the same family for joint payment of the total benefits payable to such individuals.

## [SEC. 206.] REPRESENTATION OF CLAIMANTS BEFORE THE BOARD

## SEC. 211.

(c)

(5) The performance of service by an individual in the exercise of his profession as a doctor of medicine or Christian Science practitioner; or the performance of such service by a partnership.

## SEC. 215.

(a)

(4) In the case of—

<sup>3</sup>As in original. Should be "whichever".



## SUPERSEDED PROVISIONS—SOCIAL SECURITY ACT

337 03/86

P.L. 89-97 §215. 91

(A) a woman who was entitled to a disability insurance benefit for the month before the month in which she died or became entitled to old-age insurance benefits, or

(B) a man who was entitled to a disability insurance benefit for the month before the month in which he died or attained age 65,

TABLE FOR DETERMINING PRIMARY INSURANCE AMOUNT AND MAXIMUM FAMILY BENEFITS

I (Primary insurance benefit under 1939 Act, as modified)		II (Primary insurance amount under 1954 Act)		III (Average monthly wage)		IV (Primary insurance amount)	V (Maximum family benefits)
If an individual's primary insurance benefit (as determined under subsec. (d)) is—		Or his primary insurance amount (as determined under subsec. (c)) is—		Or his average monthly wage (as determined under subsec. (b)) is—		The amount referred to in the preceding paragraphs of this subsection shall be—	And the maximum amount of benefits payable (as provided in sec. 203(a)) on the basis of his wages and self-employment income shall be—
At least—	But not more than—	At least—	But not more than—	At least—	But not more than—		
	\$13.48		\$37.00		\$67	\$40	\$60.00
\$13.49	14.00	\$37.10	38.00	\$68	69	41	61.50
14.01	14.48	38.10	39.00	70	70	42	63.00
14.49	15.00	39.10	40.00	71	72	43	64.50
15.01	15.60	40.10	41.00	73	74	44	66.00
15.61	16.20	41.10	42.00	75	76	45	67.50
16.21	16.84	42.10	43.00	77	78	46	69.00
16.85	17.60	43.10	44.00	79	80	47	70.50
17.61	18.40	44.10	45.00	81	81	48	72.00
18.41	19.24	45.10	46.00	82	83	49	73.50
19.25	20.00	46.10	47.00	84	85	50	75.00
20.01	20.64	47.10	48.00	86	87	51	76.50
20.65	21.28	48.10	49.00	88	89	52	78.00
21.29	21.88	49.10	50.00	90	90	53	79.50
21.89	22.28	50.10	50.90	91	92	54	81.00
22.29	22.68	51.00	51.80	93	94	55	82.50
22.69	23.08	51.90	52.80	95	96	56	84.00
23.09	23.44	52.90	53.70	97	97	57	85.50
23.45	23.76	53.80	54.60	98	99	58	87.00
23.77	24.20	54.70	55.60	100	101	59	88.50
24.21	24.60	55.70	56.50	102	102	60	90.00
24.61	25.00	56.60	57.40	103	104	61	91.50
25.01	25.48	57.50	58.40	105	106	62	93.00
25.49	25.92	58.50	59.30	107	107	63	94.50
25.93	26.40	59.40	60.20	108	109	64	96.00
26.41	26.94	60.30	61.20	110	113	65	97.50
26.95	27.46	61.30	62.10	114	118	66	99.00
27.47	28.00	62.20	63.00	119	122	67	100.50
28.01	28.68	63.10	64.00	123	127	68	102.00
28.69	29.25	64.10	64.90	128	132	69	105.60
29.26	29.68	65.00	65.80	133	136	70	108.80
29.69	30.36	65.90	66.80	137	141	71	112.80
30.37	30.92	66.90	67.70	142	146	72	116.80
30.93	31.36	67.80	68.60	147	150	73	120.00
31.37	32.00	68.70	69.60	151	155	74	124.00
32.01	32.60	69.70	70.50	156	160	75	128.00
32.61	33.20	70.60	71.40	161	164	76	131.20
33.21	33.88	71.50	72.40	165	169	77	135.20
33.89	34.50	72.50	73.30	170	174	78	139.20
34.51	35.00	73.40	74.20	175	178	79	142.40
35.01	35.80	74.30	75.20	179	183	80	146.40
35.81	36.40	75.30	76.10	184	188	81	150.40
36.41	37.08	76.20	77.10	189	193	82	154.40
37.09	37.60	77.20	78.00	194	197	83	157.60
37.61	38.20	78.10	78.90	198	202	84	161.60

## SUPERSEDED PROVISIONS—SOCIAL SECURITY ACT

TABLE FOR DETERMINING PRIMARY INSURANCE AMOUNT AND MAXIMUM FAMILY BENEFITS (Cont.)

I (Primary insurance benefit under 1939 Act, as modified)		II (Primary insurance amount under 1954 Act)		III (Average monthly wage)		IV (Primary insurance amount)	V (Maximum family benefits)
If an individual's primary insurance benefit (as determined under subsec. (d)) is—		Or his primary insurance amount (as determined under subsec. (c)) is—		Or his average monthly wage (as determined under subsec. (b)) is—		The amount referred to in the preceding paragraphs of this subsection shall be—	And the maximum amount of benefits payable (as provided in sec. 203(a) on the basis of his wages and self-employment income shall be—
At least—	But not more than—	At least—	But not more than—	At least—	But not more than—		
38.21	39.12	79.00	79.90	203	207	85	165.60
39.13	39.68	80.00	80.80	208	211	86	168.80
39.69	40.33	80.90	81.70	212	216	87	172.80
40.34	41.12	81.80	82.70	217	221	88	176.80
41.13	41.76	82.80	83.60	222	225	89	180.00
41.77	42.44	83.70	84.50	226	230	90	184.00
42.45	43.20	84.60	85.50	231	235	91	188.00
43.21	43.76	85.60	86.40	236	239	92	191.20
43.77	44.44	86.50	87.30	240	244	93	195.20
44.45	44.88	87.40	88.30	245	249	94	199.20
44.89	45.60	88.40	89.20	250	253	95	202.40
		89.30	90.10	254	258	96	206.40
		90.20	91.10	259	263	97	210.40
		91.20	92.00	264	267	98	213.60
		92.10	92.90	268	272	99	217.60
		93.00	93.90	273	277	100	221.60
		94.00	94.80	278	281	101	224.80
		94.90	95.80	282	286	102	228.80
		95.90	96.70	287	291	103	232.80
		96.80	97.60	292	295	104	236.00
		97.70	98.60	296	300	105	240.00
		98.70	99.50	301	305	106	244.00
		99.60	100.40	306	309	107	247.20
		100.50	101.40	310	314	108	251.20
		101.50	102.30	315	319	109	254.00
		102.40	103.20	320	323	110	254.00
		103.30	104.20	324	328	111	254.00
		104.30	105.10	329	333	112	254.00
		105.20	106.00	334	337	113	254.00
		106.10	107.00	338	342	114	254.00
		107.10	107.90	343	347	115	254.00
		108.00	108.50	348	351	116	254.00
				352	356	117	254.00
				357	361	118	254.00
				362	365	119	254.00
				366	370	120	254.00
				371	375	121	254.00
				376	379	122	254.00
				380	384	123	254.00
				385	389	124	254.00
				390	393	125	254.00
				394	398	126	254.00
				399	400	127	254.00

(b)

(2)

(C) For the purposes of subparagraph (B), "computation base years" include only calendar years occurring—

(i) after December 31, 1950, and

(ii) prior to the year in which the individual became entitled to old-age insurance benefits or died, whichever first occurred;

except that the year in which the individual became entitled to old-age insurance benefits or died, as the case may be, shall be included as a computation base year if the Secretary determines, on the basis of evidence available to him at the time of the computation of the primary insurance amount for such individual, that the inclusion of such year would result in a higher primary insurance amount. Any calendar year all of which is included in a period of disability shall not be included as a computation base year.

(3) (A) in the case of a woman, the year in which she died or (if earlier) the first year after 1960 in which she both was fully insured and had attained age 62,

(B) in the case of a man who has died, the year in which he died or (if earlier) the first year after 1960 in which he both was fully insured and had attained age 65, or

(C) in the case of a man who has not died, the first year after 1960 in which he attained (or would attain) age 65 or (if later) the first year in which he was fully insured.

(4) The provisions of this subsection shall be applicable only in the case of an individual with respect to whom not less than six of the quarters elapsing after 1950 are quarters of coverage, and—

(A) who becomes entitled to benefits after December 1960 under section 202(a) or section 223; or

(B) who dies after December 1960 without being entitled to benefits under section 202(a) or section 223; or

(C) who files an application for a recomputation under subsection (f)(2)(A) after December 1960 and is (or would, but for the provisions of subsection (f)(6), be) entitled to have his primary insurance amount recomputed under subsection (f)(2)(A); or

(D) who dies after December 1960 and whose survivors are (or would, but for the provisions of subsection (f)(6), be) entitled to a recomputation of his primary insurance amount under subsection (f)(4).

(5) In the case of any individual—

(A) to whom the provisions of this subsection are not made applicable by paragraph (4), but

(B)(i) prior to 1961, met the requirements of this paragraph (including subparagraph (E) thereof) as in effect prior to the enactment of the Social Security Amendments of 1960, or (ii) after 1960, meets the conditions of subparagraph (E) of this paragraph as in effect prior to such enactment,

then the provisions of this subsection as in effect prior to such enactment shall apply to such individual for the purposes of column III of the table appearing in subsection (a) of this section.

#### Primary Insurance Amount Under 1954 Act

(c)(1) For the purposes of column II of the table appearing in subsection (a) of this section, an individual's primary insurance amount shall be computed as provided in, and subject to the limitations specified in, (A) this section as in effect prior to the enactment of the Social Security Amendments of 1958, and (B) the applicable provisions of the Social Security Amendments of 1954.

(2) The provisions of this subsection shall be applicable only in the case of an individual—

(A) who became entitled to benefits under section 202(a) or section 223 or died prior to January 1959, and

(B) to whom the provisions of neither paragraph (4) nor paragraph (5) of subsection (b) are applicable.

(e) (3) if an individual has self-employment income in a taxable year which begins prior to the calendar year in which he becomes entitled to old-age insurance benefits and ends after the last day of the month preceding the month in which he becomes so entitled, his self-employment income in such taxable year shall not be counted in determining his benefit computation years, except as provided in subsection (f)(3)(C).

(f) (2)(A) Upon application filed after 1960 by an individual entitled to old-age insurance benefits, the Secretary shall recompute his primary insurance amount if—

(i) he has not less than six quarters of coverage in the period after 1950 and prior to the quarter in which such application is filed,

(ii) he has wages and self-employment income of more than \$1,200 in a calendar year which occurs after 1953 (not taking into account any year prior to the



calendar year in which the last previous recomputation, if any, of his primary insurance amount was effective) and after the year in which he became (without the application of section 202(j)(1)) entitled to old-age insurance benefits or filed an application for recomputation (to which he is entitled) under section 102(e)(5)(B) or 102(f)(2)(B) of the Social Security Amendments of 1954, whichever of such events is the latest, and

(iii) he filed such application after such calendar year referred to in clause (ii) in which he had such wages and self-employment income.

Such recomputation shall be effective for and after the twelfth month before the month in which he filed such application for recomputation but in no event earlier than the month following such calendar year referred to in clause (ii). For the purposes of this subparagraph an individual's self-employment income shall be allocated to calendar quarters in accordance with section 212.

(B) A recomputation pursuant to subparagraph (A) shall be made—

(i) only as provided in subsection (a)(1), if the provisions of subsection (b), as amended by the Social Security Amendments of 1960, were applicable to the last previous computation of the individual's primary insurance amount, or

(ii) as provided in subsection (a)(1) and (3), in all other cases.

Such recomputation shall be made as though the individual became entitled to old-age insurance benefits in the month in which he filed the application for such recomputation, except that if clause (i) of this subparagraph is applicable to such recomputation, the computation base years referred to in subsection (b)(2) shall include only calendar years occurring prior to the year in which he filed his application for such recomputation.

(3)(A) Upon application by an individual—

(i) who became entitled to old-age insurance benefits under section 202(a) after December 1960, or

(ii) whose primary insurance amount was recomputed as provided in paragraph (2)(B)(ii) of this subsection on the basis of an application filed after December 1960, the Secretary shall recompute his primary insurance amount if such application is filed after the calendar year in which he became entitled to old-age insurance benefits or in which he filed application for the recomputation of his primary insurance amount under clause (ii) of this sentence, whichever is the later. Such recomputation under this subparagraph shall be made as provided in subsection (a)(1) and (3) of this section, except that such individual's computation base years referred to in subsection (b)(2) shall include the calendar year referred to in the preceding sentence. Such recomputation under this subparagraph shall be effective for and after the first month for which his last previous computation of his primary insurance amount was effective, but in no event for any month prior to the twenty-fourth month before the month in which the application for such recomputation is filed.

(B) In the case of an individual who dies after December 1960 and—

(i) who, at the time of death was not entitled to old-age insurance benefits under section 202(a), or

(ii) who became entitled to such old-age insurance benefits after December 1960, or

(iii) whose primary insurance amount was recomputed under paragraph (2) of this subsection on the basis of an application filed after December 1960, or

(iv) whose primary insurance amount was recomputed under paragraph (4) of this subsection,

the Secretary shall recompute his primary insurance amount upon the filing of an application by a person entitled to monthly benefits or a lump-sum death payment on the basis of such individual's wages and self-employment income. Such recomputation shall be made as provided in subsection (a)(1) and (3) of this section, except that such individual's computation base years referred to in subsection (b)(2) shall include the calendar year in which he died in the case of an individual who was not entitled to old-age insurance benefits at the time of death or whose primary insurance amount was recomputed under paragraph (4) of this subsection, or in all other cases, the calendar year in which he filed his application for the last previous computation of his primary insurance amount. In the case of monthly benefits, such recomputation shall be effective for and after the month in which the person entitled to such monthly benefits became so entitled, but in no event for any month prior to the twenty-fourth month before the month in which the application for such recomputation is filed.

(C) In the case of an individual who becomes entitled to old-age insurance benefits in a calendar year after 1960, if such individual has self-employment income in a taxable year which begins prior to such calendar year and ends after the last day of the month preceding the month in which he became so entitled, the Secretary shall recompute such individual's primary insurance amount after the close of such taxable year and shall take into account in determining the individual's benefit computation years only

such self-employment income in such taxable year as is credited, pursuant to section 212, to the year preceding the year in which he became so entitled. Such recomputation shall be effective for and after the first month in which he became entitled to old-age insurance benefits.

(4) Upon the death after 1960 of an individual entitled to old-age insurance benefits, if any person is entitled to monthly benefits, or to a lump-sum death payment, on the basis of the wages and self-employment income of such individual, the Secretary shall recompute the decedent's primary insurance amount, but only if—

(A) the decedent would have been entitled to a recomputation under paragraph

(2)(A) if he had filed application therefor in the month in which he died; or

(B) the decedent during his lifetime was paid compensation which was treated under section 205(o) as remuneration for employment.

If the recomputation is permitted by subparagraph (A), the recomputation shall be made (if at all) as though he had filed application for a recomputation under paragraph (2)(A) in the month in which he died. If the recomputation is permitted by subparagraph (B), the recomputation shall take into account only the wages and self-employment income which were considered in the last previous computation of his primary insurance amount and the compensation (described in section 205(o)) paid to him in the years in which such wages were paid or to which such self-employment income was credited. If both of the preceding sentences are applicable to an individual, only the recomputation which results in the larger primary insurance amount shall be made.

(7)(A) In the case of a man who attains age 65 and who became entitled to old-age insurance benefits before the month in which he attains such age, his primary insurance amount shall be recomputed as provided in subsection (a) as though he became entitled to old-age insurance benefits in the month in which he attained age 65, except that his computation base years referred to in subsection (b)(2) shall include the year in which he attained age 65. Such recomputation shall be effective for and after the month in which he attained age 65.

(B) In the case of a man who became entitled to old-age insurance benefits and died before the month in which he attained age 65, the Secretary shall, if any person is entitled to monthly insurance benefits or a lump-sum death payment on the basis of the wages and self-employment income of the decedent, recompute his primary insurance amount as provided in subsection (a) as though he became entitled to old-age insurance benefits in the month in which he died; except that (i) his computation base years referred to in subsection (b)(2) shall include the year in which he died, and (ii) his elapsed years referred to in subsection (b)(3) shall not include the year in which he died or any year thereafter. In the case of monthly insurance benefits, such recomputation of a man's primary insurance amount shall be effective for and after the month in which he died.

#### SEC. 216.

(d) The term "former wife divorced" means a woman divorced from an individual, but only if (1) she is the mother of his son or daughter, (2) she legally adopted his son or daughter while she was married to him and while such son or daughter was under the age of eighteen, (3) he legally adopted her son or daughter while she was married to him and while such son or daughter was under the age of eighteen, or (4) she was married to him at the time both of them legally adopted a child under the age of eighteen.

(i)

(2) The term "period of disability" means a continuous period (beginning and ending as hereinafter provided in this subsection) during which an individual was under a disability (as defined in paragraph (1)), but only if such period is of not less than six full calendar months' duration or such individual was entitled to benefits under section 223 for one or more months in such period. No such period shall begin as to any individual unless such individual, while under such disability, files an application for a disability determination with respect to such period; and no such period shall begin as to any individual after such individual attains the age of sixty-five. A period of disability shall<sup>4</sup> begin—

(A) on the day the disability began, but only if the individual satisfies the requirements of paragraph (3) on such day; or

(B) if such individual does not satisfy the requirements of paragraph (3) on such day, then on the first day of the first quarter thereafter in which he satisfies such requirements.

A period of disability shall end with the close of the last day of the month preceding whichever of the following months is the earlier: the month in which the individual

<sup>4</sup>P.L. 89-97, §304(l), struck out "(subject to section 223(a)(3))".



attains age sixty-five or the third month following the month in which the disability ceases. No application for a disability determination which is filed more than three months before the first day on which a period of disability can begin (as determined under this paragraph), or, in any case in which clause (ii) of section 223(a)(1) is applicable, more than six months before the first month for which such applicant becomes entitled to benefits under section 223, shall be accepted as an application for purposes of this paragraph, and no such application which is filed prior to January 1, 1955, shall be accepted. Any application for a disability determination which is filed within such three months' period or six months' period shall be deemed to have been filed on such first day or in such first month, as the case may be.

(3)

(B) he had not less than twenty quarters of coverage during the forty-quarter period which ends with such quarter, not counting as part of such forty-quarter period any quarter any part of which was included in a prior period of disability unless such quarter was a quarter of coverage;

#### SEC. 217.

(g)(1) There are hereby authorized to be appropriated to the Trust Funds annually, as benefits under this title are paid after June 1956, such sums as the Secretary of Health, Education, and Welfare determines to be necessary to meet the additional costs, resulting from subsections (a), (b), and (e), of such benefits (including lump-sum death payments).

(2) The Secretary shall, before October 1, 1958, determine the amount which would place the Federal Old-Age and Survivors Insurance Trust Fund in the same position in which it would have been at the close of June 30, 1956, if section 210 of this Act, as in effect prior to the Social Security Act Amendments of 1950, and section 217 of this Act (including amendments thereof), had not been enacted. There are hereby authorized to be appropriated to such Trust Fund annually, during the first ten fiscal years beginning after such determination is made, sums aggregating the amount so determined, plus interest accruing on such amount (as reduced by appropriations made pursuant to this paragraph) for each fiscal year beginning after June 30, 1956, at a rate for such fiscal year equal to the average rate of interest (as determined by the Managing Trustee) earned on the invested assets of such Trust Fund during the preceding fiscal year.

#### SEC. 223. (a)

(3) If, for any month before the month in which an individual attains age 65, such individual is entitled to—

(A) a widow's, widower's, or parent's insurance benefit, or

(B) an old-age, wife's, or husband's insurance benefit which is reduced under subsection (q) of section 202,

such individual may not, for any month after the first month for which such individual is so entitled, become entitled to disability insurance benefits; and a period of disability may not begin with respect to such individual in any month after such first month.

(c)

(1)

(B) he had not less than twenty quarters of coverage during the forty-quarter period ending with the quarter in which such first day occurred, not counting as part of such forty-quarter period any quarter any part of which was included in a period of disability (as defined in section 216(i)) unless such quarter was a quarter of coverage.

#### ALLOTMENTS TO STATES

SEC. 522. (a) All but \$10,000,000 of the total appropriated for a fiscal year under section 521, or, if such total is less than \$35,000,000, all but the excess (if any) of such total over \$25,000,000, shall be allotted by the Secretary for use by cooperating State public-welfare agencies which have plans developed jointly by the State agency and the Secretary, as follows: He shall allot to each State \$70,000 or, if the amount appropriated under section 521 for such year is less than \$25,000,000, he shall allot to each State \$50,000 or, if greater, such portion of \$70,000 as the amount appropriated under such section bears to \$25,000,000; and he shall allot to each State an amount which bears the same ratio to the remainder of the sum available for allotment under this subsection for such year as the product of (1) the population of such State under the age of 21 and (2) the allotment percentage of such State (as determined under section 524) bears to the sum of the corresponding products of all the States.

(b)(1) If the amount allotted to a State under subsection (a) for any fiscal year is less than such State's base allotment, it shall be increased to such base allotment, the total



of the increases thereby required being derived by proportionately reducing the amount allotted under subsection (a) to each of the remaining States, but with such adjustments as may be necessary to prevent the allotment of any such remaining State under subsection (a) from being thereby reduced to less than its base allotment.

(2) For purposes of paragraph (1) the base allotment of any State for any fiscal year means the amount which would be allotted to such State for such year under the provisions of section 521, as in effect prior to the enactment of the Social Security Amendments of 1958, as applied to an appropriation of \$12,000,000.

#### DAY CARE

SEC. 527. (a) In order to assist the States to provide adequately for the care and protection of children whose parents are, for part of the day, working or seeking work, or otherwise absent from the home or unable for other reasons to provide parental supervision, the portion of the appropriation under section 521 for any fiscal year which is not allotted under section 522 shall be allotted by the Secretary among the States solely for use, under the State plan developed as provided in this part, for day care services, including the provision of day care in facilities (including private homes) which are licensed by the State, or are approved (as meeting the standards established for such licensing) by the State agency responsible for licensing facilities of this type, as follows: He shall allot to each State an amount which bears the same ratio to such portion of the appropriation as the product of (1) the population of the State under the age of 21 and (2) the allotment percentage of such State (as determined under section 524) bears to the sum of the corresponding products of all the States, except that the allotment of any State as so computed which is less than \$10,000 shall be increased to that amount, the total of the increases thereby required being derived by proportionately reducing the allotments to each of the remaining States (as so computed) having an allotment in excess of that amount, but with such adjustments as may be necessary to prevent the allotment of any of such remaining States from being thereby reduced to less than that amount.

(b) The amount of any allotment to a State under subsection (a) for any fiscal year which the State certifies to the Secretary will not be required for the purposes for which allotted shall be available for reallocation from time to time, on such dates as the Secretary may fix, to other States which the Secretary determines (1) have need in carrying out such purposes for sums in excess of those previously allotted to them under subsection (a), and (2) will be able to use such excess amounts during such fiscal year. Such reallocations shall be made on the basis of the need for additional funds in carrying out such purposes, after taking into consideration the population under the age of twenty-one, and the per capita income of each such State as compared with the population under the age of twenty-one, and the per capita income of all such States with respect to which such a determination by the Secretary has been made. Any amount so reallocated to a State shall be deemed part of its allotment under subsection (a).

#### [Title V] PART 4—GRANTS FOR SPECIAL MATERNITY AND INFANT CARE PROJECTS AND RESEARCH PROJECTS

##### SEC. 1006.

(a) who is a patient in an institution for tuberculosis or mental diseases, or (b) who has been diagnosed as having tuberculosis or psychosis and is a patient in a medical institution as a result thereof.

#### EARNED INCOME OF BLIND RECIPIENTS

SEC. 1109. Notwithstanding the provisions of sections 2(a)(10)(A), 402(a)(7), 1002(a)(8), 1402(a)(8), and 1602(a)(14), a State plan approved under title I, IV, X, XIV, or XVI may until June 30, 1954, and thereafter shall provide that where earned income has been disregarded in determining the need of an individual receiving aid to the blind under a State plan approved under title X, the earned income so disregarded (but not in excess of the amount specified in section 1002(a)(8)) shall not be taken into consideration in determining the need of any other individual for assistance under a State plan approved under title I, IV, X, XIV, or XVI.

SEC. 1405. (a) who is a patient in an institution for tuberculosis or mental diseases, or (b) who has been diagnosed as having tuberculosis or psychosis and is a patient in a medical institution as a result thereof

##### SEC. 1602. (a)

(14) provide that the State agency shall, in determining need for aid to the aged, blind, or disabled, take into consideration any other income and resources of an

individual claiming such aid, as well as any expenses reasonably attributable to the earning of any such income; except that, in making such determination with respect to any individual who is blind, the State agency (A) shall disregard the first \$85 per month of earned income plus one-half of earned income in excess of \$85 per month, and (B) shall, for a period not in excess of twelve months, and may, for a period not in excess of thirty-six months, disregard such additional amounts of other income and resources, in the case of an individual who has a plan for achieving self-support approved by the State agency, as may be necessary for the fulfillment of such plan, and in making such determination with respect to any other individual who has attained age 65 and is claiming aid to the aged, blind, or disabled, of the first \$50 per month of earned income the State agency may, after December 31, 1962, disregard not more than the first \$10 thereof plus one-half of the remainder; and

SEC. 1603. (a)

(1)

(B) the Federal percentage (as defined in section 1101(a)(8)) of the amount by which such expenditures exceed the maximum which may be counted under clause (A), not counting so much of any expenditure with respect to any month as exceeds the product of \$70 multiplied by the total number of recipients of aid to the aged, blind, or disabled for such month; plus

(C) the larger of the following: (i) the Federal medical percentage (as defined in section 6(c)) of the amount by which such expenditures exceed the maximum which may be counted under clause (B), not counting so much of any expenditure with respect to any month as exceeds (I) the product of \$85 multiplied by the total number of such recipients of aid to the aged, blind, or disabled for such month, or (II) if smaller, the total expended as aid to the aged, blind, or disabled in the form of medical or any other type of remedial care with respect to such month plus the product of \$70 multiplied by such total number of such recipients, or (ii) 15 per centum of the total of the sums expended during such quarter as aid to the aged, blind, or disabled under the State plan in the form of medical or any other type of remedial care, not counting so much of any expenditure with respect to any month as exceeds the product of \$15 multiplied by the total number of such recipients of aid to the aged, blind, or disabled for such month;

SEC. 1605. (a) For the purposes of this title, the term "aid to the aged, blind, or disabled" means money payments to, or (if provided in or after the third month before the month in which the recipient makes application for aid) medical care in behalf of or any type of remedial care recognized under State law in behalf of, needy individuals who are 65 years of age or older, are blind, or are 18 years of age or over and permanently and totally disabled, but does not include—

(1) any such payments to or care in behalf of any individual who is an inmate of a public institution (except as a patient in a medical institution) or any individual who is a patient in an institution for tuberculosis or mental diseases, or

(2) any such payments to any individual who has been diagnosed as having tuberculosis or psychosis and is a patient in a medical institution as a result thereof, or

(3) any such care in behalf of any individual, who is a patient in a medical institution as a result of a diagnosis that he has tuberculosis or psychosis, with respect to any period after the individual has been a patient in such an institution, as a result of such diagnosis, for forty-two days.

(b)

except that such term does not include any such payments with respect to—

(A) care or services for any individual who is an inmate of a public institution (except as a patient in a medical institution) or any individual who is a patient in an institution for tuberculosis or mental diseases; or

(B) care or services for any individual, who is a patient in a<sup>5</sup> medical institution as a result of a diagnosis of tuberculosis or psychosis, with respect to any period after the individual has been a patient in such an institution, as a result of such diagnosis, for forty-two days.

<sup>5</sup>As in original. One "a" should be deleted.



**Provisions of the Social Security Act as in Effect Prior to  
P.L. 89-554, Approved September 6, 1966 (80 Stat. 378)  
[Enactment of title 5, United States Code]**

## **TITLE XV—UNEMPLOYMENT COMPENSATION FOR FEDERAL EMPLOYEES**

### **DEFINITIONS**

SEC. 1501. When used in this title—

(a) The term "Federal service" means any service performed after 1952 in the employ of the United States or any instrumentality thereof which is wholly or partially owned by the United States, except that the term does not include service (other than service to which section 1511 applies) performed—

(1) by an elective officer in the executive or legislative branch of the Government of the United States;

(2) as a member of the Armed Forces of the United States;

(3) by foreign service personnel for whom special separation allowances are provided by the Foreign Service Act of 1946 (60 Stat. 999);

(4) prior to January 1, 1955, for the Bonneville Power Administrator if such service constitutes employment under section 1607 (m) of the Internal Revenue Code of 1939;

(5) outside the United States by an individual who is not a citizen of the United States;

(6) by any individual as an employee who is excluded by Executive order from the operation of subchapter III of chapter 83 of title 5, United States Code,<sup>1</sup> because he is paid on a contract or fee basis;

(7) by any individual as an employee receiving nominal compensation of \$12 or less per annum;

(8) in a hospital, home, or other institution of the United States by a patient or inmate thereof;

(9) by any individual as an employee included under section 5351(2) of title 5, United States Code<sup>2</sup> (relating to certain interns, student nurses, and other student employees of hospitals of the Federal Government; 5 U.S.C., sec. 1052);

(10) by any individual as an employee serving on a temporary basis in case of fire, storm, earthquake, flood, or other similar emergency;

(11) by any individual as an employee who is employed under a Federal relief program to relieve him from unemployment;

(12) as a member of a State, county, or community committee under the Production and Marketing Administration or of any other board, council, committee, or other similar body, unless such board, council, committee, or other body is composed exclusively of individuals otherwise in the full-time employ of the United States; or

(13) by an officer or a member of the crew on or in connection with an American vessel (A) owned by or bareboat chartered to the United States and (B) whose business is conducted by a general agent of the Secretary of Commerce, if contributions on account of such service are required to be made to an unemployment fund under a State unemployment compensation law pursuant to section 1606 (g) of the Internal Revenue Code of 1939 or section 3305 (g) of the Internal Revenue Code of 1954.

For the purpose of paragraph (5) of this subsection, the term "United States" when used in the geographical sense means the States, the District of Columbia, the Commonwealth of Puerto Rico, and the Virgin Islands.

(b) The term "Federal wages" means all remuneration for Federal service, including cash allowances and remuneration in any medium other than cash.

(c) The term "Federal employee" means an individual who has performed Federal service.

(d) The term "compensation" means cash benefits payable to individuals with respect to their unemployment (including any portion thereof payable with respect to dependents).

(e) The term "benefit year" means the benefit year as defined in the applicable State unemployment compensation law; except that, if such State law does not define a benefit year, then such term means the period prescribed in the agreement under this

<sup>1</sup>P.L. 90-248, §403(f)(1), struck out "the Civil Service Retirement Act of 1930" and substituted "subchapter III of chapter 83 of title 5, United States Code."

<sup>2</sup>P.L. 90-248, §403(f)(2), struck out "2 of the Act of August 4, 1947" and substituted "5351(2) of title 5, United States Code".



title with such State or, in the absence of an agreement, the period prescribed by the Secretary.

(f) The term "Secretary" means the Secretary of Labor.

#### COMPENSATION FOR FEDERAL EMPLOYEES UNDER STATE AGREEMENTS

SEC. 1502. (a) The Secretary is authorized on behalf of the United States to enter into an agreement with any State, or with the agency administering the unemployment compensation law of such State, under which such State agency (1) will make, as agent of the United States, payments of compensation, on the basis provided in subsection (b) of this section, to Federal employees, and (2) will otherwise cooperate with the Secretary and with other State agencies in making payments of compensation under this title.

(b)(1) Except as provided in paragraph (2), any such agreement shall provide that compensation will be paid by the State to any Federal employee, with respect to unemployment after December 31, 1954, in the same amount, on the same terms, and subject to the same conditions as the compensation which would be payable to such employee under the unemployment compensation law of the State if the Federal service and Federal wages of such employee assigned to such State under section 1504 had been included as employment and wages under such law.

(2) In the case of the Commonwealth of Puerto Rico, the agreement shall provide that compensation will be paid by the Commonwealth of Puerto Rico to any Federal employee whose Federal service and Federal wages are assigned under section 1504 to such Commonwealth, with respect to unemployment after December 31, 1960 (but only in the case of weeks of unemployment beginning before January 1, 1966), in the same amount, on the same terms, and subject to the same conditions as the compensation which would be payable to such employee under the unemployment compensation law of the District of Columbia if such employee's Federal service and Federal wages had been included as employment and wages under such law, except that if such employee, without regard to his Federal service and Federal wages, has employment or wages sufficient to qualify for any compensation during the benefit year under such law, then payments of compensation under this subsection shall be made only on the basis of his Federal service and Federal wages. In applying this paragraph or subsection (b) of section 1503, as the case may be, employment and wages under the unemployment compensation law of the Commonwealth of Puerto Rico shall not be combined with Federal service or Federal wages.

(c) Any determination by a State agency with respect to entitlement to compensation pursuant to an agreement under this section shall be subject to review in the same manner and to the same extent as determinations under the State unemployment compensation law, and only in such manner and to such extent.

(d) Each agreement shall provide the terms and conditions upon which the agreement may be amended or terminated.

#### COMPENSATION FOR FEDERAL EMPLOYEES IN ABSENCE OF STATE AGREEMENT

SEC. 1503. (a) In the case of a Federal employee whose Federal service and Federal wages are assigned under section 1504 to a State which does not have an agreement under this title with the Secretary, the Secretary, in accordance with regulations prescribed by him, shall, upon the filing by such employee of a claim for compensation under this subsection, make payments of compensation to him with respect to unemployment after December 31, 1954, in the same amounts, on the same terms, and subject to the same conditions as would be paid to him under the unemployment compensation law of such State if such employee's Federal service and Federal wages had been included as employment and wages under such law, except that if such employee, without regard to his Federal service and Federal wages, has employment or wages sufficient to qualify for any compensation during the benefit year under the law of such State, then payments of compensation under this subsection shall be made only on the basis of his Federal service and Federal wages. For the purposes of this subsection, the term "State" does not include the Commonwealth of Puerto Rico.

(b) In the case of a Federal employee whose Federal service and Federal wages are assigned under section 1504 to the Virgin Islands, the Secretary, in accordance with regulations prescribed by him, shall, upon the filing by such employee of a claim for compensation under this subsection, make payments of compensation to him with respect to unemployment after December 31, 1954, in the same amounts, on the same terms, and subject to the same conditions as would be paid to him under the unemployment compensation law of the District of Columbia if such employee's Federal service and Federal wages had been included as employment and wages under such law, except that if such employee, without regard to his Federal service and

Federal wages, has employment or wages sufficient to qualify for any compensation during the benefit year under such law, then payments of compensation under this subsection shall be made only on the basis of his Federal service and Federal wages. This subsection shall apply in respect of the Commonwealth of Puerto Rico only if such Commonwealth does not have an agreement under this title with the Secretary.

(c) Any Federal employee whose claim for compensation under subsection (a) or (b) of this section has been denied shall be entitled to a fair hearing in accordance with regulations prescribed by the Secretary. Any final determination by the Secretary with respect to entitlement to compensation under this section shall be subject to review by the courts in the same manner and to the same extent as is provided in section 205 (g) with respect to final decisions of the Secretary of Health, Education, and Welfare under title II.

(d) The Secretary may utilize for the purposes of this section the personnel and facilities of the agency in the Virgin Islands cooperating with the United States Employment Service under the Act of June 6, 1933 (48 Stat. 113), as amended, and may delegate to officials of such agency any authority granted to him by this section whenever the Secretary determines such delegation to be necessary in carrying out the purposes of this title. For the purpose of payments made to such agency under such Act, the furnishing of such personnel and facilities shall be deemed to be a part of the administration of the public employment offices of such agency.

#### STATE TO WHICH FEDERAL SERVICE AND WAGES ARE ASSIGNABLE

SEC. 1504. In accordance with regulations prescribed by the Secretary, the Federal service and Federal wages of an employee shall be assigned to the State in which he had his last official station in Federal service prior to the filing of his first claim for compensation for the benefit year, except that—

(1) if, at the time of the filing of such first claim, he resides in another State in which he performed, after the termination of such Federal service, service covered under the unemployment compensation law of such other State, such Federal service and Federal wages shall be assigned to such other State;

(2) if his last official station in Federal service, prior to the filing of such first claim, was outside the United States, such Federal service and Federal wages shall be assigned to the State where he resides at the time he files such first claim; and

(3) if such first claim is filed while he is residing in the Virgin Islands, such Federal service and Federal wages shall be assigned to the Virgin Islands.

For the purposes of paragraph (2), the term "United States" does not include the Commonwealth of Puerto Rico.

**[SEC. 1505. Repealed.]\***

#### PAYMENTS TO STATES

SEC. 1506. (a) Each State shall be entitled to be paid by the United States an amount equal to the additional cost to the State of payments of compensation made under and in accordance with an agreement under this title which would not have been incurred by the State but for the agreement.

(b) In making payments pursuant to subsection (a) of this section, there shall be paid to the State, either in advance or by way of reimbursement, as may be determined by the Secretary, such sum as the Secretary estimates the State will be entitled to receive under this title for each calendar month, reduced or increased, as the case may be, by any sum by which the Secretary finds that his estimates for any prior calendar month were greater or less than the amounts which should have been paid to the State. Such estimates may be made upon the basis of such statistical, sampling, or other method as may be agreed upon by the Secretary and the State agency.

(c) The Secretary shall from time to time certify to the Secretary of the Treasury for payment to each State sums payable to such State under this section. The Secretary of the Treasury, prior to audit or settlement by the General Accounting Office, shall make payment to the State in accordance with such certification, from the funds for carrying out the purposes of this title.

(d) All money paid a State under this title shall be used solely for the purposes for which it is paid; and any money so paid which is not used for such purposes shall be returned, at the time specified in the agreement under this title, to the Treasury and credited to current applicable appropriations, funds, or accounts from which payments to States under this title may be made.

(e) An agreement under this title may require any officer or employee of the State certifying payments or disbursing funds pursuant to the agreement, or otherwise



participating in its performance, to give a surety bond to the United States in such amount as the Secretary may deem necessary, and may provide for the payment of the cost of such bond from funds for carrying out the purposes of this title.

(f) No person designated by the Secretary, or designated pursuant to an agreement under this title, as a certifying officer, shall, in the absence of gross negligence or intent to defraud the United States, be liable with respect to the payment of any compensation certified by him under this title.

(g) No disbursing officer shall, in the absence of gross negligence or intent to defraud the United States, be liable with respect to any payment by him under this title if it was based upon a voucher signed by a certifying officer designated as provided in subsection (f) of this section.

(h) For the purpose of payments made to a State under title III, administration by the State agency of such State pursuant to an agreement under this title shall be deemed to be a part of the administration of the State unemployment compensation law.

#### INFORMATION

SEC. 1507. (a) All Federal departments, agencies, and wholly or partially owned instrumentalities of the United States are directed to make available to State agencies which have agreements under this title or to the Secretary, as the case may be, such information with respect to the Federal service and Federal wages of any Federal employee as the Secretary may find practicable and necessary for the determination of such employee's entitlement to compensation under this title. Such information shall include the findings of the employing agency with respect to—

- (1) whether the employee has performed Federal service,
- (2) the periods of such service,
- (3) the amount of remuneration for such service, and
- (4) the reasons for termination of such service.

The employing agency shall make the findings in such form and manner as the Secretary shall by regulations prescribe (which regulations shall include provision for correction by the employing agency of errors or omissions). Any such findings which have been made in accordance with such regulations shall be final and conclusive for the purposes of sections 1502 (c) and 1503 (c). This subsection shall not apply with respect to Federal service and Federal wages covered by section 1511.

(b) The agency administering the unemployment compensation law of any State shall furnish to the Secretary such information as the Secretary may find necessary or appropriate in carrying out the provisions of this title, and such information shall be deemed reports required by the Secretary for the purposes of paragraph (6) of subsection (a) of section 303.

#### PENALTIES

SEC. 1508. (a) Whoever makes a false statement or representation of a material fact knowing it to be false, or knowingly fails to disclose a material fact, to obtain or increase for himself or for any other individual any payment authorized to be paid under this title or under an agreement thereunder shall be fined not more than \$1,000 or imprisoned for not more than one year, or both.

(b)(1) If a State agency or the Secretary, as the case may be, or a court of competent jurisdiction, finds that any person—

(A) has made, or has caused to be made by another, a false statement or representation of a material fact knowing it to be false, or has knowingly failed, or caused another to fail, to disclose a material fact, and

(B) as a result of such action has received any amount as compensation under this title to which he was not entitled,

such person shall be liable to repay such amount to the State agency or the Secretary, as the case may be. In lieu of requiring the repayment of any amount under this paragraph, the State agency or the Secretary, as the case may be, may recover such amount by deductions from any compensation payable to such person under this title during the two-year period following the date of the finding. Any such finding by a State agency or the Secretary, as the case may be, may be made only after an opportunity for a fair hearing, subject to such further review as may be appropriate under sections 1502 (c) and 1503 (c).

(2) Any amount repaid to a State agency under paragraph (1) shall be deposited into the fund from which payment was made. Any amount repaid to the Secretary under paragraph (1) shall be returned to the Treasury and credited to the current applicable appropriation, fund, or account from which payment was made.



## REGULATIONS

SEC. 1509. The Secretary is hereby authorized to make such rules and regulations as may be necessary to carry out the provisions of this title. The Secretary shall insofar as practicable consult with representatives of the State unemployment compensation agencies before prescribing any rules or regulations which may affect the performance by such agencies of functions pursuant to agreements under this title.

## APPROPRIATIONS

SEC. 1510. There are hereby authorized to be appropriated out of any moneys not otherwise appropriated such sums as are necessary to carry out the provisions of this title.

## EX-SERVICEMEN'S UNEMPLOYMENT COMPENSATION PROGRAM

SEC. 1511. (a) The provisions of this title, except where inconsistent with the provisions of this section, apply, with respect to weeks of unemployment ending after the sixtieth day after the date of the enactment of this section, to individuals who have had Federal service as defined in subsection (b).

(b) For the purposes of this section, the term "Federal service" means active service (including active duty for training purposes) in the Army, Navy, Air Force, Marine Corps, or Coast Guard of the United States if—

(1) such service was continuous for ninety days or more, or was terminated earlier by reason of an actual service-incurred injury or disability; and

(2) with respect to such service, the individual (A) has been discharged or released under conditions other than dishonorable, and (B) was not given a bad conduct discharge, or, if an officer, did not resign for the good of the service.

No individual shall be treated as having Federal service within the meaning of the preceding sentence unless he has a period of such service which either begins after January 31, 1955, or terminates after the sixtieth day after the date of the enactment of this section.

(c) For the purposes of this section, the term "Federal wages" means remuneration for the periods of service covered by subsection (b), computed on the basis of remuneration for the individual's pay grade at the time of his discharge or release from the latest period of such service as specified in the schedule applicable at the time of filing of his first claim for compensation for the benefit year. The Secretary shall issue, from time to time, after consultation with the Secretary of Defense, schedules specifying the remuneration for each pay grade of servicemen covered by this section, which shall reflect representative amounts for appropriate elements of such remuneration (whether in cash or in kind).

(d)(1) Any Federal department or agency shall, when designated by the Secretary, make available to the appropriate State agency or to the Secretary, as the case may be, such information (including findings in the form and manner prescribed by the Secretary by regulation) as the Secretary may find practicable and necessary for the determination of an individual's entitlement to compensation by reason of this section.

(2) Subject to correction of errors and omissions as prescribed by the Secretary by regulation, the following shall be final and conclusive for the purposes of sections 1502 (c) and 1503 (c):

(A) Any finding by a Federal department or agency, made in accordance with paragraph (1), with respect to (i) whether an individual has met any condition specified in subsection (b), (ii) the individual's periods of Federal service as defined in subsection (b), and (iii) the individual's pay grade at the time of his discharge or release from the latest period of such Federal service.

(B) the schedules of remuneration issued by the Secretary under subsection (c).

(e) Notwithstanding the provisions of section 1504, all Federal service and Federal wages covered by this section, not previously assigned, shall be assigned to the State, or the Virgin Islands, as the case may be, in which the claimant first files his claim for unemployment compensation after his most recent discharge or release from such Federal service. This assignment shall constitute an assignment under section 1504 for all purposes of this title.

(f) Payments made under section 4 (c) of the Armed Forces Leave Act of 1946 (37 U.S.C. 33 (c)) at the termination of Federal service covered by this section shall be treated for determining periods of Federal service as payments of annual leave to which section 1505 continues (without regard to its repeal) to apply.

(g) An individual who is eligible to receive a mustering-out payment under chapter 43 of title 38, United States Code shall not be eligible to receive compensation under this title with respect to weeks of unemployment completed within thirty days after

\*As in original. Capitalization not consistent.

## SUPERSEDED PROVISIONS—SOCIAL SECURITY ACT

his discharge or release if he receives \$100 in such mustering-out payments; within sixty days after his discharge or release if he receives \$200 in such mustering-out payment; or within ninety days after his discharge or release if he receives \$300 in such mustering-out payment.

(h) No payment shall be made by reason of this section to an individual for any period with respect to which he receives an education and training allowance under subsection (a), (b), (c), or (d) of section 1632 of title 38, United States Code, a subsistence allowance under chapter 31 of such title 38 or under part VIII of Veterans Regulation Numbered 1 (a), or an educational assistance allowance under chapter 35 of such title 38.

(i) Any individual—

(1) who meets the wage and employment requirements for compensation under the law of the State to which his Federal service and Federal wages as defined in this section have been assigned (or, in the case of Puerto Rico or the Virgin Islands, the law of the District of Columbia) but would not meet such requirements except by the use of such Federal service and Federal wages, or

(2) whose weekly benefit amount computed according to the law of such State (or the law of the District of Columbia, as the case may be) is increased by the use of such Federal service and Federal wages, shall not thereafter be entitled to unemployment compensation under the provisions of subchapter I of chapter 41 of title 38, United States Code.

---

**Provisions of the Social Security Act as in Effect Prior to  
P.L. 90-248, Approved January 2, 1968 (81 Stat. 821)  
Social Security Amendments of 1967**

SEC. 202.

(b)

(2) Except as provided in subsection (q), such wife's insurance benefit for each month shall be equal to one-half of the primary insurance amount of her husband (or, in the case of a divorced wife, her former husband) for such month.

(c)

(3) Except as provided in subsection (q), such husband's insurance benefit for each month shall be equal to one-half of the primary insurance amount of his wife for such month.

(d)

(5) A child shall be deemed dependent upon his natural or adopting mother at the time specified in paragraph (1)(C) if such mother or adopting mother was a currently insured individual. A child shall also be deemed dependent upon his natural or adopting mother, or upon his stepmother, at the time specified in paragraph (1)(C) if, at such time, (A) she was living with or contributing to the support of such child, and (B) either (i) such child was neither living with nor receiving contributions from his father or adopting father, or (ii) such child was receiving at least one-half of his support from her.

(e)(1)

(B) has attained age 60,

(f)(1)

(B) has attained age 62,

**Reduction of Old-Age, Disability, Wife's, Husband's, or Widow's  
Insurance Benefit Amounts**

(q)

(6) For purposes of this subsection, the "reduction period" for an individual's old-age, wife's, husband's, or widow's insurance benefit is the period—

(A) beginning—

(i) in the case of an old-age, husband's, or widow's insurance benefit, with the first day of the first month for which such individual is entitled to such benefit, or

(ii) in the case of a wife's insurance benefit, with the first day of the first month for which a certificate described in paragraph (5)(A)(i) is effective, and

(B) ending with the last day of the month before the month in which such individual attains retirement age.



## SEC. 203. (a)

(2) when two or more persons were entitled (without the application of section 202(j)(1) and section 223(b)) to monthly benefits under section 202 or 223 for any month which begins after December 1964 and before the enactment of the Social Security Amendments of 1965, on the basis of the wages and self-employment income of such insured individual, such total of benefits for any month occurring after December 1964 shall not be reduced to less than the larger of—

(A) the amount determined under this subsection without regard to this paragraph, or

(B)(i) with respect to the month in which such Amendments are enacted or any prior month, an amount equal to the sum of the amounts derived by multiplying the benefit amount determined under this title (including this subsection, but without the application of section 222(b), section 202(q), and subsections (b), (c), and (d) of this section), as in effect prior to the enactment of such Amendments, for each such person (other than a person who would not be entitled to such benefits for such month without the application of the amendments made by section 306 of the Social Security Amendments of 1965), for such month, by 107 percent and raising each such increased amount, if it is not a multiple of \$0.10, to the next higher multiple of \$0.10, and

(ii) with respect to any month after the month in which such Amendments are enacted, an amount equal to the sum of the amounts derived by multiplying the benefit amount determined under this title (including this subsection, but without the application of section 222(b), section 202(q), and subsections (b), (c), and (d) of this section), as in effect prior to the enactment of such Amendments, for each such person (other than a person who would not be entitled to such benefits for such month without the application of the amendments made by section 306 of the Social Security Amendments of 1965) for the month of enactment, by 107 percent and raising each such increased amount, if it is not a multiple of \$0.10, to the next higher multiple of \$0.10;

but in any such case (I) paragraph (1) of this subsection shall not be applied to such total of benefits after the application of subparagraph (B) of this paragraph, and (II) if section 202(k)(2)(A) was applicable in the case of any of such benefits for any such month beginning before the enactment of the Social Security Amendments of 1965, and ceases to apply after such month, the provisions of subparagraph (B) shall be applied, for and after the month in which such section 202(k)(2)(A) ceases to apply, as though paragraph (1) had not been applicable to such total of benefits for such month beginning prior to such enactment, or

SEC. 204. (a) Whenever an error has been made with respect to payments to an individual under this title (including payments made prior to January 1, 1940), proper adjustment shall be made, under regulations prescribed by the Administrator, by increasing or decreasing subsequent payments to which such individual is entitled. If such individual dies before such adjustment has been completed, adjustment shall be made by increasing or decreasing subsequent benefits payable with respect to the wages and self-employment income which were the basis of benefits of such deceased individual.

(b) There shall be no adjustment or recovery by the United States in any case where incorrect payment has been made to an individual who is without fault (including payments made prior to January 1, 1940), and where adjustment or recovery would defeat the purpose of this title or would be against equity and good conscience.

(d) Notwithstanding the provisions of subsection (a), if an individual dies before any payment due him under this title is completed, and the total amount due at the time of his death does not exceed the amount of the monthly insurance benefit to which he was entitled for the month preceding the month in which he died, payment of the amount due shall be made—

(1) to the person, if any, determined by the Secretary to be the surviving spouse of the deceased individual and to have been living in the same household with the deceased at the time of his death, or

(2) if there is no such person, or if such person dies before receiving payment, to the legal representative of the estate of such deceased individual.

## SEC. 211.

## (c)

(1) The performance of the functions of a public office;



SEC. 215.  
(a)

TABLE FOR DETERMINING PRIMARY INSURANCE AMOUNT AND MAXIMUM FAMILY BENEFITS BEGINNING

I  (Primary insurance benefit under 1939 Act, as modified)		II  (Primary insurance amount under 1958 Act, as modified)	III  (Average monthly wage)		IV  (Primary insurance amount)	V  (Maximum family benefits)
If an individual's primary insurance benefit (as determined under subsec. (d)) is—		Or his primary insurance amount (as determined under subsec. (c)) is—	Or his average monthly wage (as determined under subsec. (b)) is—		The amount referred to in the preceding paragraphs of this subsection shall be—	And the maximum amount of benefits payable (as provided in sec. 203(a)) on the basis of his wages and self-employment income shall be—
At least—	But not more than—		At least—	But not more than—		
	\$13.48	\$40		\$67	\$44.00	\$66.00
\$13.49	14.00	41	\$68	69	45.00	67.50
14.01	14.48	42	70	70	46.00	69.00
14.49	15.00	43	71	72	47.00	70.50
15.01	15.60	44	73	74	48.00	72.00
15.61	16.20	45	75	76	49.00	73.50
16.21	16.84	46	77	78	50.00	75.00
16.85	17.60	47	79	80	51.00	76.50
17.61	18.40	48	81	81	52.00	78.00
18.41	19.24	49	82	83	53.00	79.50
19.25	20.00	50	84	85	54.00	81.00
20.01	20.64	51	86	87	55.00	82.50
20.65	21.28	52	88	89	56.00	84.00
21.29	21.88	53	90	90	57.00	85.50
21.89	22.28	54	91	92	58.00	87.00
22.29	22.68	55	93	94	59.00	88.50
22.69	23.08	56	95	96	60.00	90.00
23.09	23.44	57	97	97	61.00	91.50
23.45	23.76	58	98	99	62.10	93.20
23.77	24.20	59	100	101	63.20	94.80
24.21	24.60	60	102	102	64.20	96.30
24.61	25.00	61	103	104	65.30	98.00
25.01	25.48	62	105	106	66.40	99.60
25.49	25.92	63	107	107	67.50	101.30
25.93	26.40	64	108	109	68.50	102.80
26.41	26.94	65	110	113	69.60	104.40
26.95	27.46	66	114	118	70.70	106.10
27.47	28.00	67	119	122	71.70	107.60
28.01	28.68	68	123	127	72.80	109.20
28.69	29.25	69	128	132	73.90	110.90
29.26	29.68	70	133	136	74.90	112.40
29.69	30.36	71	137	141	76.00	114.00
30.37	30.92	72	142	146	77.10	116.80
30.93	31.36	73	147	150	78.20	120.00
31.37	32.00	74	151	155	79.20	124.00
32.01	32.60	75	156	160	80.30	128.00
32.61	33.20	76	161	164	81.40	131.20
33.21	33.88	77	165	169	82.40	135.20
33.89	34.50	78	170	174	83.50	139.20
34.51	35.00	79	175	178	84.60	142.40
35.01	35.80	80	179	183	85.60	146.40

## SUPERSEDED PROVISIONS—SOCIAL SECURITY ACT

337 03/86

P.L. 90-248 §215.

107

## TABLE FOR DETERMINING PRIMARY INSURANCE AMOUNT AND MAXIMUM FAMILY BENEFITS BEGINNING (Cont.)

I (Primary insurance benefit under 1939 Act, as modified)		II (Primary insurance amount under 1958 Act, as modified)	III (Average monthly wage)		IV (Primary insurance amount)	V (Maximum family benefits)
If an individual's primary insurance benefit (as determined under subsec. (d)) is—		Or his primary insurance amount (as determined under subsec. (c)) is—	Or his average monthly wage (as determined under subsec. (b)) is—		The amount referred to in the preceding paragraphs of this subsection shall be—	And the maximum amount of benefits payable (as provided in sec. 203(a)) on the basis of his wages and self-employment income shall be—
At least—	But not more than—		At least—	But not more than—		
35.81	36.40	81	184	188	86.70	150.40
36.41	37.08	82	189	193	87.80	154.40
37.09	37.60	83	194	197	88.90	157.60
37.61	38.20	84	198	202	89.90	161.60
38.21	39.12	85	203	207	91.00	165.60
39.13	39.68	86	208	211	92.10	168.80
39.09	40.33	87	212	216	93.10	172.80
40.34	41.12	88	217	221	94.20	176.80
41.13	41.76	89	222	225	95.30	180.00
41.77	42.44	90	226	230	96.30	184.00
42.45	43.20	91	231	235	97.40	188.00
43.21	43.76	92	236	239	98.50	191.20
43.77	44.44	93	240	244	99.60	195.20
44.45	44.88	94	245	249	100.60	199.20
44.89	45.60	95	250	253	101.70	202.40
		96	254	258	102.80	206.40
		97	259	263	103.80	210.40
		98	264	267	104.90	213.60
		99	268	272	106.00	217.60
		100	273	277	107.00	221.60
		101	278	281	108.10	224.80
		102	282	286	109.20	228.80
		103	287	291	110.30	232.80
		104	292	295	111.30	236.00
		105	296	300	112.40	240.00
		106	301	305	113.50	244.00
		107	306	309	114.50	247.20
		108	310	314	115.60	251.20
		109	315	319	116.70	255.20
		110	320	323	117.70	258.40
		111	324	328	118.80	262.40
		112	329	333	119.90	266.40
		113	334	337	121.00	269.60
		114	338	342	122.00	273.60
		115	343	347	123.10	277.60
		116	348	351	124.20	280.80
		117	352	356	125.20	284.80
		118	357	361	126.30	288.80
		119	362	365	127.40	292.00
		120	366	370	128.40	296.00
		121	371	375	129.50	298.00
		122	376	379	130.60	299.60
		123	380	384	131.70	301.60

SUPERSEDED PROVISIONS—SOCIAL SECURITY ACT

TABLE FOR DETERMINING PRIMARY INSURANCE AMOUNT AND MAXIMUM FAMILY BENEFITS BEGINNING (Cont.)

I		II	III		IV	V
(Primary insurance benefit under 1939 Act, as modified)		(Primary insurance amount under 1958 Act, as modified)	(Average monthly wage)		(Primary insurance amount)	(Maximum family benefits)
If an individual's primary insurance benefit (as determined under subsec. (d)) is—		Or his primary insurance amount (as determined under subsec. (c)) is—	Or his average monthly wage (as determined under subsec. (b)) is—		The amount referred to in the preceding paragraphs of this subsection shall be—	And the maximum amount of benefits payable (as provided in sec. 203(a)) on the basis of his wages and self-employment income shall be—
At least—	But not more than—		At least—	But not more than—		
		124	385	389	132.70	303.60
		125	390	393	133.80	305.20
		126	394	398	134.90	307.20
		127	399	403	135.90	309.20
			404	407	137.00	310.80
			408	412	138.00	312.80
			413	417	139.00	314.80
			418	421	140.00	316.40
			422	426	141.00	318.40
			427	431	142.00	320.40
			432	436	143.00	322.40
			437	440	144.00	324.00
			441	445	145.00	326.00
			446	450	146.00	328.00
			451	454	147.00	329.60
			455	459	148.00	331.60
			460	464	149.00	333.60
			465	468	150.00	335.20
			469	473	151.00	337.20
			474	478	152.00	339.20
			479	482	153.00	340.80
			483	487	154.00	342.80
			488	492	155.00	344.80
			493	496	156.00	346.40
			497	501	157.00	348.40
			502	506	158.00	350.40
			507	510	159.00	352.00
			511	515	160.00	354.00
			516	520	161.00	356.00
			521	524	162.00	357.60
			525	529	163.00	359.60
			530	534	164.00	361.60
			535	538	165.00	363.20
			539	543	166.00	365.20
			544	548	167.00	367.20
			549	550	168.00	368.00

(b)

(4) The provisions of this subsection shall be applicable only in the case of an individual—

(A) who becomes entitled, after December 1965, to benefits under section 202(a) or section 223; or

(B) who dies after December 1965 without being entitled to benefits under section 202(a) or section 223; or



(C) whose primary insurance amount is required to be recomputed under subsection (f)(2), as amended by the Social Security Amendments of 1965; except that it shall not apply to any such individual for purposes of monthly benefits for months before January 1966.

(5) For the purposes of column III of the table appearing in subsection (a) of this section, the provisions of this subsection, as in effect prior to the enactment of the Social Security Amendments of 1965, shall apply—

(A) in the case of an individual to whom the provisions of this subsection are not made applicable by paragraph (4), but who, on or after the date of the enactment of the Social Security Amendments of 1965 and prior to 1966, met the requirements of this paragraph or paragraph (4), as in effect prior to such enactment, and

(B) with respect to monthly benefits for months before January 1966, in the case of an individual to whom the provisions of this subsection are made applicable by paragraph (4).

#### Primary Insurance Amount Under 1958 Act, as Modified

(c)(1) For the purposes of column II of the table appearing in subsection (a) of this section, an individual's primary insurance amount shall be computed as provided in, and subject to the limitations specified in, (A) this section as in effect prior to the enactment of the Social Security Amendments of 1965, and (B) the applicable provisions of the Social Security Amendments of 1960.

(2) The provisions of this subsection shall be applicable only in the case of an individual who became entitled to benefits under section 202(a) or section 223 before the date of enactment of the Social Security Amendments of 1965 or who died before such date.

#### Primary Insurance Benefit Under 1939 Act

(d)(1) For the purposes of column I of the table appearing in subsection (a) of this section, an individual's primary insurance benefit shall be computed as provided in this title as in effect prior to the enactment of the Social Security Act Amendments of 1950, except that—

(A) In the computation of such benefit, such individual's average monthly wage shall (in lieu of being determined under section 209(f) of this title as in effect prior to the enactment of such amendments) be determined as provided in subsection (b) of this section (but without regard to paragraphs (4) and (5) thereof), except that for the purposes of paragraphs (2)(C) and (3) of subsection (b), 1936, shall be used instead of 1950.

(B) For purposes of such computation, the date he became entitled to old-age insurance benefits shall be deemed to be the date he became entitled to primary insurance benefits.

(C) The 1 per centum addition provided for in section 209(e)(2) of this Act as in effect prior to the enactment of the Social Security Act Amendments of 1950 shall be applicable only with respect to calendar years prior to 1951, except that any wages paid in any year prior to such year all of which was included in a period of disability shall not be counted.

(D) The provisions of subsection (e) shall be applicable to such computation.

(2) The provisions of this subsection shall be applicable only in the case of an individual—

(A) with respect to whom at least one of the quarters elapsing prior to 1951 is a quarter of coverage;

(B) who meets the requirements of any of the subparagraphs of paragraph (4) of subsection (b) of this section; and

(C) who attained age 22 after 1950 and with respect to whom less than six of the quarters elapsing after 1950 are quarters of coverage, or who attained such age before 1951.

(3) The provisions of this subsection as in effect prior to the enactment of the Social Security Amendments of 1965 shall be applicable in the case of an individual who meets the requirements of subsection (b)(5) (as in effect after such enactment).

(f)

(2) With respect to each year—

(A) which begins after December 31, 1964, and

(B) for any part of which an individual is entitled to old-age insurance benefits, the Secretary shall, at such time or times and within such period as he may by regulations prescribe, recompute the primary insurance amount of such individual. Such recomputation shall be made—

(C) as provided in subsection (a)(1) and (3) if such year is either the year in which he became entitled to such old-age insurance benefits or the year preceding such year, or

(D) as provided in subsection (a)(1) in any other case;

and in all cases such recomputation shall be made as though the year with respect to which such recomputation is made is the last year of the period specified in paragraph (2)(C) of subsection (b). A recomputation under this paragraph with respect to any year shall be effective—

SEC. 216.

(i)(1) (B) blindness; and the term “blindness” means central visual acuity of 5/200 or less in the better eye with the use of a correcting lens.

SEC. 218.

(c)

(3)

(A) Any service of an emergency nature;

SEC. 223.

(c)

(2) The term “disability” means—

(A) inability to engage in any substantial gainful activity by reason of any medically determinable physical or mental impairment which can be expected to result in death or which has lasted or can be expected to last for a continuous period of not less than 12 months; or

(B) in the case of an individual who has attained the age of 55 and is blind (within the meaning of “blindness” as defined in section 216(i)(1)), inability by reason of such blindness to engage in substantial gainful activity requiring skills or abilities comparable to those of any gainful activity in which he has previously engaged with some regularity and over a substantial period of time.

An individual shall not be considered to be under a disability unless he furnishes such proof of the existence thereof as may be required.

## TITLE IV—GRANTS TO STATES FOR AID AND SERVICES TO NEEDY FAMILIES WITH CHILDREN

SEC. 402. (a) (7) provide that the State agency shall, in determining need, take into consideration any other income and resources of any child or relative claiming aid to families with dependent children, as well as any expenses reasonably attributable to the earning of any such income; except that, in making such determination, (A) the State agency may disregard not more than \$50 per month of earned income of each dependent child under the age of 18 but not in excess of \$150 per month of earned income of such dependent children in the same home, (B) the State agency may, subject to limitations prescribed by the Secretary, permit all or any portion of the earned or other income to be set aside for future identifiable needs of a dependent child, and (C) the State agency may, before disregarding the amounts referred to in clauses (A) and (B), disregard not more than \$5 of any income; (14)<sup>1</sup> provide for the development and application of a program for such welfare and related services for each child who receives aid to families with dependent children as may be necessary in the light of the particular home conditions and other needs of such child, and provide for coordination of such programs, and any other services provided for children under the State plan, with the child-welfare services plan developed as provided in part 3 of title V, with a view toward providing welfare and related services which will best promote the welfare of such child and his family

SEC. 403. (a)

(3)

(A) 75 per centum of so much of such expenditures as are for—

(i) services which are prescribed pursuant to subsection (c)(1) and are provided (in accordance with the next sentence) to any relative, specified in section 406(a), with whom any dependent child (applying for or receiving aid to families with dependent children) is living in order to help such relative attain or retain capability for self-support or self-care, or services which are so prescribed and so provided in order to maintain and strengthen family life for any such child, or

(ii) other services, specified by the Secretary as likely to prevent or reduce dependency, so provided to any such child or relative, or

(iii) any of the services prescribed pursuant to subsection (c)(1), and of the services specified as provided in clause (ii), which the Secretary may

<sup>1</sup>P.L. 90-248, §202(a), redesignated the former paragraph (13) as paragraph (14).



specify as appropriate for any relative specified in section 406(a) with whom any child (who, within such period or periods as the Secretary may prescribe, has been or is likely to become an applicant for or recipient of aid to families with dependent children) is living, or as appropriate for such a child, if such services are requested by such relative and are provided to such relative or child in accordance with the next sentence, or

(iv) the training of personnel employed or preparing for employment by the State agency or by the local agency administering the plan in the political subdivision; plus

(B) one-half of so much of such expenditures (not included under subparagraph (A)) as are for services provided (in accordance with the next sentence) to any relative, specified in section 406(a), with whom any child (who, within such period or periods as the Secretary may prescribe, has been or is likely to become an applicant for or recipient of aid to families with dependent children) is living, or to such child, if such services are requested by such relative or for services so provided to any child who is an applicant for or recipient of such aid, or to any relative, specified in section 406(a), with whom such a child is living; plus

(4) in the case of any State whose State plan approved under section 402 does not meet the requirements of subsection (c)(1), an amount equal to one-half of the total of the sums expended during such quarter as found necessary by the Secretary for the proper and efficient administration of the State plan, including services referred to in paragraph (3) and provided in accordance with the provisions of such paragraph; and<sup>2</sup>

(c)(1) In order for a State to qualify for payments under paragraph (3) of subsection (a), its State plan approved under section 402 must provide that the State agency shall make available at least those services to maintain and strengthen family life for children, and to help relatives specified in section 406(a) with whom children (who are applicants for or recipients of aid to families with dependent children) are living to attain or retain capability for self-support or self-care, which are prescribed by the Secretary.

(2) In the case of any State whose State plan included a provision meeting the requirements of paragraph (1), but with respect to which the Secretary finds, after reasonable notice and opportunity for hearing to the State agency administering or supervising the administration of such plan, that—

(A) the provision has been so changed that it no longer complies with the requirements of paragraph (1), or

(B) in the administration of the plan there is a failure to comply substantially with such provision,

the Secretary shall notify such State agency that further payments will not be made to the State under paragraph (3) of subsection (a) until he is satisfied that there will no longer be any such failure to comply. Until the Secretary is so satisfied further payments with respect to the administration of such State plan shall not be made under paragraph (3) of subsection (a) but shall instead be made, subject to the other provisions of this part<sup>3</sup>, under paragraph (4) of such subsection.

Sec. 406.

(b)(2)

(B) making such payments only in cases in which such payments will, under the rules otherwise applicable under the State plan for determining need and the amount of aid to families with dependent children to be paid (and in conjunction with other income and resources), meet all the need of the individuals with respect to whom such payments are made;

#### DEPENDENT CHILDREN OF UNEMPLOYED PARENTS

SEC. 407. Effective for the period beginning May 1, 1961, and ending with the close of June 30, 1968, the term "dependent child" shall, notwithstanding section 406(a), include a needy child who meets the requirements of section 406(a)(2), who has been deprived of parental support or care by reason of the unemployment (as defined by the State) of a parent, and who is living with any of the relatives specified in section 406(a)(1) in a place of residence maintained by one or more of such relatives as his (or their) own home, but only with respect to a State whose State plan approved under section 402—

(1) includes aid for any such child, and

(2) includes—

<sup>2</sup>P.L. 90-248, §206(a), struck out the period and substituted "; and".

<sup>3</sup>P.L. 90-248, §241(b)(3), struck out "title" and substituted "part".



(A) provision for entering into cooperative arrangements with the system of public employment offices in the State looking toward employment of the unemployed parents of such children, including appropriate provision for registration and periodic reregistration of the unemployed parent of any such child and for maximum utilization of the job placement services and other services and facilities of such offices, and

(B) provisions to assure that aid to families with dependent children is not provided to any such child or relative if, and for as long as, the unemployed parent refuses without good cause to accept employment, in which he is able to engage, which (i) is offered through such public employment offices, or (ii) is otherwise offered by an employer if the offer is determined by the State or local agency administering the State plan, after notification by such employer to be a bona fide offer of such employment, and

(3) includes provision (A) for entering into cooperative arrangements with the State agency responsible for administering or supervising the administration of vocational education in the State, looking toward maximum utilization of available public vocational education services and facilities in the State in order to encourage the retraining of individuals capable of being retrained, and (B) for denying aid to families with dependent children to any such child or relative if, and for as long as, the unemployed parent refuses without good cause to undergo any such retraining.

For purposes of the preceding sentence, a State plan may, at the option of the State, provide for the denial of all (or any part) of the aid under the plan to which any child or relative might otherwise be entitled for any month, if the unemployed parent of such child receives unemployment compensation under an unemployment compensation law of a State or of the United States for any week any part of which is included in such month.

## TITLE V—GRANTS TO STATES FOR MATERNAL AND CHILD WELFARE

### PART 1—MATERNAL AND CHILD HEALTH SERVICES

#### APPROPRIATION

SECTION 501. For the purpose of enabling each State to extend and improve, as far as practicable under the conditions in such State, services for promoting the health of mothers and children, especially in rural areas and in areas suffering from severe economic distress, the following sums are hereby authorized to be appropriated: \$25,000,000 for the fiscal year ending June 30, 1963, \$30,000,000 for the fiscal year ending June 30, 1964, \$35,000,000 for the fiscal year ending June 30, 1965, \$45,000,000 for the fiscal year ending June 30, 1966, \$50,000,000 for the fiscal year ending June 30, 1967, \$55,000,000 for the fiscal year ending June 30, 1968, \$55,000,000 for the fiscal year ending June 30, 1969, and \$60,000,000 for the fiscal year ending June 30, 1970, and each fiscal year thereafter. The sums made available under this section shall be used for making payments to States which have submitted, and had approved by the Administrator, State plans for such services.

#### ALLOTMENTS TO STATES

SEC. 502. (a) The Secretary shall allot one-half of the sum appropriated pursuant to section 501 for each fiscal year as follows: He shall allot to each State \$70,000 and such part of the remainder of such one-half as he finds that the number of live births in such State bore to the total number of live births in the United States in the latest calendar year for which he has statistics.

(b) The Secretary shall also allot to the States (in addition to the allotments made under subsection (a)) the remaining one-half of the sum appropriated for each fiscal year pursuant to section 501. Such one-half shall be allotted from time to time according to the financial need of each State for assistance in carrying out its State plan, as determined by the Administrator after taking into consideration the number of live births in such State; except that not more than 25 per centum of such one-half shall be available for grants to State health agencies (administering or supervising the administration of a State plan approved under section 503), and to public or other nonprofit institutions of higher learning (situated in any State), for special projects of regional or national significance which may contribute to the advancement of maternal and child health.

(c) The amount of any allotment to a State under subsection (a) for any fiscal year remaining unpaid to such State at the end of such fiscal year shall be available for payment to such State under section 504 until the end of the second succeeding fiscal year. No payment to a State under section 504 shall be made out of its allotment for any fiscal year until its allotment for the preceding fiscal year has been exhausted or has ceased to be available.

#### APPROVAL OF STATE PLANS

SEC. 503. (a) A State plan for maternal and child-health services must (1) provide for financial participation by the State; (2) provide for the administration of the plan by the State health agency or the supervision of the administration of the plan by the State health agency; (3) provide such methods of administration (including after January 1, 1940, methods relating to the establishment and maintenance of personnel standards on a merit basis, except that the Administrator shall exercise no authority with respect to the selection, tenure of office, and compensation of any individual employed in accordance with such methods) as are necessary for the proper and efficient operation of the plan.<sup>4</sup> (4) provide that the State health agency will make such reports, in such form and containing such information, as the Administrator may from time to time require, and comply with such provisions as he may from time to time find necessary to assure the correctness and verification of such reports; (5) provide for the extension and improvement of local maternal and child-health services administered by local child-health units; (6) provide for cooperation with medical, nursing, and welfare groups and organizations; (7) provide for the development of demonstration services in needy areas and among groups in special need; and (8) effective July 1, 1967, provide for payment of the reasonable cost (as determined in accordance with standards approved by the Secretary and included in the plan) of inpatient hospital services provided under the plan.

(b) The Administrator shall approve any plan which fulfills the conditions specified in subsection (a) and shall thereupon notify the Administrator and the State health agency of his approval.

#### PAYMENT TO STATES

SEC. 504. (a) From the sums appropriated therefor and the allotments available under section 502(a), the Secretary of the Treasury shall pay to each State which has an approved plan for maternal and child-health services, for each quarter, beginning with the quarter commencing July 1, 1935, an amount, which shall be used exclusively for carrying out the State plan, equal to one-half of the total sum expended during such quarter for carrying out such plan.

(b) The method of computing and paying such amounts shall be as follows:

(1) The Administrator shall, prior to the beginning of each quarter, estimate the amount to be paid to the State for such quarter under the provisions of subsection (a), such estimate to be based on (A) a report filed by the State containing its estimate of the total sum to be expended in such quarter in accordance with the provisions of such subsection and stating the amount appropriated or made available by the State and its political subdivisions for such expenditures in such quarter, and if such amount is less than one-half of the total sum of such estimated expenditures, the source or sources from which the difference is expected to be derived, and (B) such investigation as he may find necessary.

(2) The Administrator shall then certify the amount so estimated by him to the Secretary of the Treasury, reduced or increased, as the case may be, by any sum by which the Administrator finds that his estimate for any prior quarter was greater or less than the amount which should have been paid to the State for such quarter, except to the extent that such sum has been applied to make the amount certified for any prior quarter greater or less than the amount estimated by the Administrator for such prior quarter.

(3) The Secretary of the Treasury shall thereupon, through the Division of Disbursement of the Treasury Department and prior to audit or settlement by the General Accounting Office, pay to the State, at the time or times fixed by the Administrator, the amount so certified.

(c) The Administrator shall from time to time certify to the Secretary of the Treasury the amounts to be paid to the States from the allotments available under section 502(b), and the Secretary of the Treasury shall, through the Division of Disbursement of the Treasury Department and prior to audit or settlement by the General Accounting Office, make payments of such amounts from such allotments at the time or times specified by the Administrator. Payments of grants for special

<sup>4</sup>As in original. Should be a semicolon.



projects under section 502(b) may be made in advance or by way of reimbursement, and in such installments, as the Secretary may determine; and shall be made on such conditions as the Secretary finds necessary to carry out the purposes of the grants.

(d) Notwithstanding the preceding provisions of this section, no payment shall be made to any State thereunder for any period after June 30, 1966, unless it makes a satisfactory showing that the State is extending the provision of maternal and child health services in the State with a view to making such services available by July 1, 1975, to children in all parts of the State.

#### OPERATION OF STATE PLANS

SEC. 505. In the case of any State plan for maternal and child-health services which has been approved by the Administrator, if the Administrator, after reasonable notice and opportunity for hearing to the State agency administering or supervising the administration of such plan, finds that in the administration of the plan there is a failure to comply substantially with any provision required by section 503 to be included in the plan, he shall notify such State agency that further payments will not be made to the State until he is satisfied that there is no longer any such failure to comply. Until he is so satisfied he shall make no further certification to the Secretary of the Treasury with respect to such State.

#### PART 2—SERVICES FOR CRIPPLED CHILDREN

##### APPROPRIATION

SEC. 511. For the purpose of enabling each State to extend and improve (especially in rural areas and in areas suffering from severe economic distress), as far as practicable under the conditions in such State, services for locating crippled children, and for providing medical, surgical, corrective, and other services and care, and facilities for diagnosis, hospitalization, and aftercare, for children who are crippled or who are suffering from conditions which lead to crippling, the following sums are hereby authorized to be appropriated: \$25,000,000 for the fiscal year ending June 30, 1963, \$30,000,000 for the fiscal year ending June 30, 1964, \$35,000,000 for the fiscal year ending June 30, 1965, \$45,000,000 for the fiscal year ending June 30, 1966, \$50,000,000 for the fiscal year ending June 30, 1967, \$55,000,000 for the fiscal year ending June 30, 1968, \$55,000,000 for the fiscal year ending June 30, 1969, and \$60,000,000 for the fiscal year ending June 30, 1970, and each fiscal year thereafter. The sums made available under this section shall be used for making payments to States which have submitted, and had approved by the Administrator, State plans for such services.

##### ALLOTMENTS TO STATES

SEC. 512. (a) The Secretary shall allot one-half of the sum appropriated pursuant to section 511 for each fiscal year as follows: He shall allot to each State \$70,000 and shall allot the remainder of such one-half to the States according to the need of each State as determined by him after taking into consideration the number of crippled children in such State in need of the services referred to in section 511 and the cost of furnishing such services to them.

(b) The Secretary shall also allot to the States (in addition to the allotments made pursuant to subsection (a)) the remaining one-half of the sum appropriated for each fiscal year under section 511. Such one-half shall be allotted from time to time according to the financial need of each State for assistance in carrying out its State plan, as determined by the Administrator after taking into consideration the number of crippled children in each State in need of the services referred to in section 511 and the cost of furnishing such services to them; except that not more than 25 per centum of such one-half shall be available for grants to State agencies (administering or supervising the administration of a State plan approved under section 513), and to public or other nonprofit institutions of higher learning (situated in any State), for special projects of regional or national significance which may contribute to the advancement of services for crippled children.

(c) The amount of any allotment to a State under subsection (a) for any fiscal year remaining unpaid to such State at the end of such fiscal year shall be available for payment to such State under section 514 until the end of the second succeeding fiscal year. No payment to a State under section 514 shall be made out of its allotment for any fiscal year until its allotment for the preceding fiscal year has been exhausted or has ceased to be available.



## APPROVAL OF STATE PLANS

SEC. 513. (a) A State plan for services for crippled children must (1) provide for financial participation by the State; (2) provide for the administration of the plan by a State agency or the supervision of the administration of the plan by a State agency; (3) provide such methods of administration (including after January 1, 1940, methods relating to the establishment and maintenance of personnel standards on a merit basis, except that the Administrator shall exercise no authority with respect to the selection, tenure of office, and compensation of any individual employed in accordance with such methods) as are necessary for the proper and efficient operation of the plan.<sup>5</sup> (4) provide that the State agency will make such reports, in such form and containing such information, as the Administrator may from time to time require, and comply with such provisions as he may from time to time find necessary to assure the correctness and verification of such reports; (5) provide for carrying out the purposes specified in section 511; (6) provide for cooperation with medical, health, nursing, and welfare groups and organizations and with any agency in such State charged with administering State laws providing for vocational rehabilitation of physically handicapped children; and (7) effective July 1, 1967, provide for payment of the reasonable cost (as determined in accordance with standards approved by the Secretary and included in the plan) of inpatient hospital services provided under the plan.

(b) The Administrator shall approve any plan which fulfills the conditions specified in subsection (a) and shall thereupon notify the Administrator and the State agency of his approval.

## PAYMENT TO STATES

SEC. 514. (a) From the sums appropriated therefor and the allotments available under section 512(a), the Secretary of the Treasury shall pay to each State which has an approved plan for services for crippled children, for each quarter, beginning with the quarter commencing July 1, 1935, an amount, which shall be used exclusively for carrying out the State plan, equal to one-half of the total sum expended during such quarter for carrying out such plan.

(b) The method of computing and paying such amounts shall be as follows:

(1) The Administrator shall, prior to the beginning of each quarter, estimate the amount to be paid to the State for such quarter under the provisions of subsection (a), such estimate to be based on (A) a report filed by the State containing its estimate of the total sum to be expended in such quarter in accordance with the provisions of such subsection and stating the amount appropriated or made available by the State and its political subdivisions for such expenditures in such quarter, and if such amount is less than one-half of the total sum of such estimated expenditures, the source or sources from which the difference is expected to be derived, and (B) such investigation as he may find necessary.

(2) The Administrator shall then certify the amount so estimated by him to the Secretary of the Treasury, reduced or increased, as the case may be, by any sum by which the Administrator finds that his estimate for any prior quarter was greater or less than the amount which should have been paid to the State for such quarter, except to the extent that such sum has been applied to make the amount certified for any prior quarter greater or less than the amount estimated by the Administrator for such prior quarter.

(3) The Secretary of the Treasury shall thereupon, through the Division of Disbursement of the Treasury Department and prior to audit or settlement by the General Accounting Office, pay to the State, at the time or times fixed by the Administrator, the amount so certified.

(c) The Administrator shall from time to time certify to the Secretary of the Treasury the amounts to be paid to the States from the allotment available under section 512(b), and the Secretary of the Treasury shall, through the Division of Disbursement of the Treasury Department, and prior to audit or settlement by the General Accounting Office, make payments of such amounts from such allotments at the time or times specified by the Administrator. Payments of grants for special projects under section 512(b) or 516 may be made in advance or by way of reimbursement, and in such installments, as the Secretary may determine; and shall be made on such conditions as the Secretary finds necessary to carry out the purposes of the grants.

(d) Notwithstanding the preceding provisions of this subsection, no payment shall be made to any State thereunder for any period after June 30, 1966, unless it makes a satisfactory showing that the State is extending the provision of crippled children's services in the State with a view to making such services available by July 1, 1975, to children in all parts of the State.

<sup>5</sup>As in original. Period should be a semicolon.

## OPERATION OF STATE PLANS

SEC. 515. In the case of any State plan for services for crippled children which has been approved by the Administrator, if the Administrator, after reasonable notice and opportunity for hearing to the State agency administering or supervising the administration of such plan, finds that in the administration of the plan there is a failure to comply substantially with any provision required by section 513 to be included in the plan, he shall notify such State agency that further payments will not be made to the State until he is satisfied that there is no longer any such failure to comply. Until he is so satisfied he shall make no further certification to the Secretary of the Treasury with respect to such State.

## TRAINING OF PROFESSIONAL PERSONNEL

SEC. 516. There are authorized to be appropriated \$5,000,000 for the fiscal year ending June 30, 1967, \$10,000,000 for the fiscal year ending June 30, 1968, and \$17,500,000 for each fiscal year thereafter, for grants by the Secretary to public or other nonprofit institutions of higher learning for training professional personnel for health and related care of crippled children, particularly mentally retarded children and children with multiple handicaps.

## PART 3—CHILD-WELFARE SERVICES

## APPROPRIATION

SEC. 521. For the purpose of enabling the United States, through the Secretary, to cooperate with State public-welfare agencies in establishing, extending, and strengthening child-welfare services, the following sums are hereby authorized to be appropriated: \$25,000,000 each for the fiscal year ending June 30, 1961, and the succeeding fiscal year, \$30,000,000 for the fiscal year ending June 30, 1963, \$35,000,000 for the fiscal year ending June 30, 1964, \$40,000,000 for the fiscal year ending June 30, 1965, \$45,000,000 for the fiscal year ending June 30, 1966, \$50,000,000 for the fiscal year ending June 30, 1967, \$55,000,000 for the fiscal year ending June 30, 1968, \$55,000,000 for the fiscal year ending June 30, 1969, and \$60,000,000 for the fiscal year ending June 30, 1970, and each fiscal year thereafter.

## ALLOTMENTS TO STATES

SEC. 522. The sum appropriated pursuant to section 521 for each fiscal year shall be allotted by the Secretary for use by cooperating State public welfare agencies which have plans developed jointly by the State agency and the Secretary, as follows: He shall allot \$70,000 to each State, and shall allot to each State an amount which bears the same ratio to the remainder of the sum so appropriated for such year as the product of (1) the population of such State under the age of 21 and (2) the allotment percentage of such State (as determined under section 524) bears to the sum of the corresponding products of all the States.

## PAYMENT TO STATES

SEC. 523. (a) From the sums appropriated therefor and the allotment available under this part, the Secretary shall from time to time pay to each State—

(1) that has a plan for child-welfare services which has been developed as provided in this part and which—

(A) provides for coordination between the services provided under such plan and the services provided for dependent children under the State plan approved under title IV, with a view to provision of welfare and related services which will best promote the welfare of such children and their families, and

(B) provides, with respect to day care services (including the provision of such care) provided under the plan—

(i) for cooperative arrangements with the State health authority and the State agency primarily responsible for State supervision of public schools to assure maximum utilization of such agencies in the provision of necessary health services and education for children receiving day care,

(ii) for an advisory committee, to advise the State public welfare agency on the general policy involved in the provision of day care services under the State plan, which shall include among its members representatives of other State agencies concerned with day care or services related thereto and persons representative of professional or civic or other public or



nonprofit private agencies, organizations, or groups concerned with the provision of day care,

(iii) for such safeguards as may be necessary to assure provision of day care under the plan only in cases in which it is in the best interest of the child and the mother and only in cases in which it is determined, under criteria established by the State, that a need for such care exists; and, in cases in which the family is able to pay part or all of the costs of such care, for payment of such fees as may be reasonable in the light of such ability,

(iv) for giving priority, in determining the existence of need for such day care, to members of low-income or other groups in the population and to geographical areas which have the greatest relative need for extension of such day care, and

(v) that day care provided under the plan will be provided only in facilities (including private homes) which are licensed by the State, or approved (as meeting the standards established for such licensing) by the State agency responsible for licensing facilities of this type, and

(2) that makes a satisfactory showing that the State is extending the provision of child-welfare services in the State, with priority being given to communities with the greatest need for such services after giving consideration to their relative financial need, and with a view to making available by July 1, 1975, in all political subdivisions of the State, for all children in need thereof, child-welfare services provided by the staff (which shall to the extent feasible be composed of trained child-welfare personnel) of the State public welfare agency or of the local agency participating in the administration of the plan in the political subdivision,

an amount equal to the Federal share (as determined under section 524) of the total sum expended under such plan (including the cost of administration of the plan) in meeting the costs of State, district, county, or other local child-welfare services, in developing State services for the encouragement and assistance of adequate methods of community child-welfare organization, in paying the costs of returning any runaway child who has not attained the age of eighteen to his own community in another State, and of maintaining such child until such return (for a period not exceeding fifteen days), in cases in which such costs cannot be met by the parents of such child or by any person, agency, or institution legally responsible for the support of such child: *Provided*, That in developing such services for children the facilities and experience of voluntary agencies shall be utilized in accordance with child-care programs and arrangements in the States and local communities as may be authorized by the State.

(b) The method of computing and paying such amounts shall be as follows:

(1) The Secretary shall, prior to the beginning of each period for which a payment is to be made, estimate the amount to be paid to the State for such period under the provisions of subsection (a).

(2) From the allotment available therefor, the Secretary shall pay the amount so estimated, reduced or increased, as the case may be, by any sum (not previously adjusted under this section) by which he finds that his estimate of the amount to be paid the State for any prior period under this section was greater or less than the amount which should have been paid thereunder to the State for such prior period.

#### ALLOTMENT PERCENTAGE AND FEDERAL SHARE

SEC. 524. (a) The "allotment percentage" for any State shall be 100 per centum less the State percentage; and the State percentage shall be that percentage which bears the same ratio to 50 per centum as the per capita income of such State bears to the per capita income of the United States; except that (A) the allotment percentage shall in no case be less than 30 per centum or more than 70 per centum, and (B) the allotment percentage shall be 70 per centum in the case of Puerto Rico, the Virgin Islands, and Guam.

(b) For the fiscal year ending June 30, 1960, and each year thereafter, the "Federal share" for any State shall be 100 per centum less that percentage which bears the same ratio to 50 per centum as the per capita income of such State bears to the per capita income of the United States, except that (1) in no case shall the Federal share be less than 33½ per centum or more than 66⅔ per centum, and (2) the Federal share shall be 66⅔ per centum in the case of Puerto Rico, the Virgin Islands, and Guam. For the fiscal year ending June 30, 1959, the Federal share shall be determined pursuant to the provisions of section 521 as in effect prior to the enactment of the Social Security Amendments of 1958.

(c) The Federal share and the allotment percentage for each State shall be promulgated by the Secretary between July 1 and August 31 of each even-numbered year, on the basis of the average per capita income of each State and of the United



## SUPERSEDED PROVISIONS—SOCIAL SECURITY ACT

118 P.L. 90-248 §525.

337 03/86

States for the three most recent calendar years for which satisfactory data are available from the Department of Commerce. Such promulgation shall be conclusive for each of the two fiscal years in the period beginning July 1 next succeeding such promulgation: *Provided*, That the Secretary shall promulgate such Federal shares and allotment percentages as soon as possible after the enactment of the Social Security Amendments of 1958, which promulgation shall be conclusive for each of the 3 fiscal years in the period ending June 30, 1961.

(d) For purposes of this section, the term "United States" means the fifty States and the District of Columbia.

(e) Promulgations made before satisfactory data are available from the Department of Commerce for a full year on the per capita income of Alaska shall prescribe a Federal share for Alaska of 50 per centum and, for purposes of such promulgations, Alaska shall not be included as part of the "United States". Promulgations made thereafter but before per capita income data for Alaska for a full three-year period are available from the Department of Commerce shall be based on satisfactory data available therefrom for Alaska for such one full year or, when such data are available for a two-year period, for such two years.

## REALLOTMENT

SEC. 525. The amount of any allotment to a State under section 522 for any fiscal year which the State certifies to the Secretary will not be required for carrying out the State plan developed as provided in such section shall be available for reallocation from time to time, on such dates as the Secretary may fix, to other States which the Secretary determines (1) have need in carrying out their State plans so developed for sums in excess of those previously allotted to them under that section and (2) will be able to use such excess amounts during such fiscal year. Such reallocations shall be made on the basis of the State plans so developed, after taking into consideration the population under the age of twenty-one, and the per capita income of each such State as compared with the population under the age of twenty-one, and the per capita income of all such States with respect to which such a determination by the Secretary has been made. Any amount so reallocated to a State shall be deemed part of its allotment under section 522.

## RESEARCH, TRAINING, OR DEMONSTRATION PROJECTS

SEC. 526. (a) There are hereby authorized to be appropriated for each fiscal year such sums as the Congress may determine for grants by the Secretary to public or other nonprofit institutions of higher learning, and to public or other nonprofit agencies and organizations engaged in research or child welfare activities, for special research or demonstration projects in the field of child welfare which are of regional or national significance and for special projects for the demonstration of new methods or facilities which show promise of substantial contribution to the advancement of child welfare; and for grants by the Secretary to public or other nonprofit institutions of higher learning for special projects for training personnel for work in the field of child welfare, including traineeships with such stipends and allowances as may be permitted by the Secretary.

(b) Payments of grants for special projects under this section may be made in advance or by way of reimbursement, and in such installments, as the Secretary may determine; and shall be made on such conditions as the Secretary finds necessary to carry out the purposes of the grants.

## DEFINITION

SEC. 528. For purposes of this part, the term "child-welfare services" means public social services which supplement, or substitute for, parental care and supervision for the purpose of (1) preventing or remedying, or assisting in the solution of problems which may result in, the neglect, abuse, exploitation, or delinquency of children, (2) protecting and caring for homeless, dependent, or neglected children, (3) protecting and promoting the welfare of children of working mothers, and (4) otherwise protecting and promoting the welfare of children, including the strengthening of their own homes where possible or, where needed, the provision of adequate care of children away from their homes in foster family homes or day-care or other child-care facilities.

## PART 4—GRANTS FOR SPECIAL MATERNITY AND INFANT CARE PROJECTS, FOR PROJECTS FOR HEALTH OF SCHOOL AND PRESCHOOL CHILDREN, AND FOR RESEARCH PROJECTS

## SPECIAL PROJECT GRANTS FOR MATERNITY AND INFANT CARE

SEC. 531. (a) In order to help reduce the incidence of mental retardation caused by complications associated with childbearing, there are authorized to be appropriated \$5,000,000 for the fiscal year ending June 30, 1964, \$15,000,000 for the fiscal year ending June 30, 1965, \$30,000,000 for each of the next 2 fiscal years, and \$35,000,000 for the fiscal year ending June 30, 1968,\* for grants to assist in meeting the cost of projects as provided in this section.

(b) From the sums appropriated pursuant to subsection (a), the Secretary is authorized to make grants to the State health agency of any State and, with the consent of such agency in the case of a project in which such agency is unable or unwilling to participate, to the health agency of any political subdivision of the State, to pay not to exceed 75 per centum of the cost (exclusive of general agency overhead) of any project for the provision of necessary health care to prospective mothers (including, after childbirth, health care to mothers and their infants) who have or are likely to have conditions associated with childbearing which increase the hazards to the health of the mothers or their infants (including those which may cause physical or mental defects in the infants) and whom the State or local health agency determines will not receive necessary health care because they are from low-income families or for other reasons beyond their control.

(c) Payment of grants under this section may be made (after necessary adjustment on account of previously made underpayments or overpayments) in advance or by way of reimbursement, and in such installments and on such conditions, as the Secretary may determine.

## SPECIAL PROJECT GRANTS FOR HEALTH OF SCHOOL AND PRESCHOOL CHILDREN

SEC. 532. (a) In order to promote the health of children and youth of school or preschool age, particularly in areas with concentrations of low-income families, there are authorized to be appropriated \$15,000,000 for the fiscal year ending June 30, 1966, \$35,000,000 for the fiscal year ending June 30, 1967, \$40,000,000 for the fiscal year ending June 30, 1968, \$45,000,000 for the first year ending June 30, 1969, and \$50,000,000 for the fiscal year ending June 30, 1970, for grants as provided in this section.

(b) From the sums appropriated pursuant to subsection (a), the Secretary is authorized to make grants to the State health agency of any State and (with the consent of such agency) to the health agency of any political subdivision of the State, to the State agency of the State administering or supervising the administration of the State plan approved under section 513, to any school of medicine (with appropriate participation by a school of dentistry), and to any teaching hospital affiliated with such a school, to pay not to exceed 75 per centum of the cost of projects of a comprehensive nature for health care and services for children and youth of school age or for preschool children (to help them prepare to start school). No project shall be eligible for a grant under this section unless it provides (1) for the coordination of health care and services provided under it with, and utilization (to the extent feasible) of, other State or local health, welfare, and education programs for such children, (2) for payment of the reasonable cost (as determined in accordance with standards approved by the Secretary) of inpatient hospital services provided under the project, and (3) that any treatment, correction of defects, or aftercare provided under the project is available only to children who would not otherwise receive it because they are from low-income families or for other reasons beyond their control; and no such project for children and youth of school age shall be considered to be of a comprehensive nature for purposes of this section unless it includes (subject to the limitation in the preceding provisions of this sentence) at least such screening, diagnosis, preventive services, treatment, correction of defects, and aftercare, both medical and dental, as may be provided for in regulations of the Secretary.

(c) Payment of grants under this section may be made (after necessary adjustment on account of previously made underpayments or overpayments) in advance or by way of reimbursement, and in such installments and on such conditions, as the Secretary may determine.

\*P.L. 90-248, §303, struck out "and \$30,000,000 for each of the next three fiscal years" and substituted "\$30,000,000 for each of the next 2 fiscal years, and \$35,000,000 for the fiscal year ending June 30, 1968".



RESEARCH PROJECTS RELATING TO MATERNAL AND CHILD HEALTH  
SERVICES AND CRIPPLED CHILDREN'S SERVICES

SEC. 533. (a) There are authorized to be appropriated for each fiscal year, beginning with the fiscal year ending June 30, 1964, such sums, not exceeding \$8,000,000 for any fiscal year, as the Congress may determine to enable the Secretary to make grants to or jointly financed cooperative arrangements with public or other nonprofit institutions of higher learning, and public or other nonprofit agencies and organizations engaged in research or in maternal and child health or crippled children's programs, and contracts with public or nonprofit private agencies and organizations engaged in research or in such programs, for research projects relating to maternal and child health services or crippled children's services which show promise of substantial contribution to the advancement thereof.

(b) Payments of grants or under contracts or cooperative arrangements under this section may be made (after necessary adjustment, in the case of grants, on account of previously made underpayments or overpayments) in advance or by way of reimbursements, and in such installments and on such conditions, as the Secretary may determine.

## PART 5—ADMINISTRATION

SEC. 541. (a) There is hereby authorized to be appropriated for the fiscal year ending June 30, 1947, the sum of \$1,000,000 for all necessary expenses of the Federal Security Agency in administering the provisions of this title.

(b) The Administrator shall make such studies and investigations as will promote the efficient administration of this title, except section 531.

LIMITATION ON PAYMENTS TO PUERTO RICO, THE VIRGIN ISLANDS, AND  
GUAM

SEC. 1108. The total amount certified by the Secretary of Health, Education, and Welfare under title I (other than section 3(a)(3) thereof), IV, X, XIV, and XVI (other than section 1603(a)(3) thereof) for payment to Puerto Rico with respect to any fiscal year shall not exceed \$9,800,000; the total amount certified by the Secretary under such titles for payments to the Virgin Islands with respect to any fiscal year shall not exceed \$330,000; and the total amount certified by the Secretary under such titles for payment to Guam with respect to any fiscal year shall not exceed \$450,000. Notwithstanding the provisions of sections 502(a)(2), 512(a)(2), and 522(a), and until such time as the Congress may by appropriation or other law otherwise provide, the Secretary shall, in lieu of the initial allotment specified in such sections, allot such smaller amounts to Guam as he may deem appropriate.

## MAINTENANCE OF STATE EFFORT

SEC. 1117. (a) The total of the amounts determined under sections 3, 403, 1003, 1403, 1603, and 1903 for any State for any quarter beginning after June 30, 1966\*, and ending before July 1, 1969, shall be reduced to the extent that—

(1) the excess of (A) the total of the amounts determined for the State under sections 3, 403, 1003, 1403, 1603, and 1903 for such quarter over (B) the total of the amounts determined for the State under sections 3, 403, 1003, 1403, and 1603 for the same quarter of the fiscal year ending June 30, 1965, is greater than

(2) the excess of (A) the total of the expenditures for such quarter (for which the determination is being made) under the plans of the State approved under titles I,<sup>8</sup> X, XIV, XVI, and XIX, and part A of title IV,<sup>9</sup> over (B) the total of the expenditures under the State plans of the State approved under titles I, IV, X, XIV, and XVI for the same quarter of the fiscal year ending June 30, 1965; except that, at the option of the State, any of the following may be substituted (with respect to the quarters of any fiscal year) for the amount determined as provided in paragraph (1)(B)—

(3) the total of the amounts determined for the State under sections 3, 403, 1003, 1403, and 1603 for the same quarter in the fiscal year ending June 30, 1964; or

(4) the average of the totals determined for the State under sections 3, 403, 1003, 1403, and 1603 for each quarter in the fiscal year ending June 30, 1964, or June 30, 1965.

If the substitution of the total referred to in paragraph (3) is chosen by the State, there shall be substituted for the amount determined under clause (B) of paragraph (2) the total of the expenditures under the plans of the State approved under titles I, IV, X,

\*P.L. 90-248, §221(c), struck out "December 31, 1965" and substituted "June 30, 1966".

<sup>8</sup>P.L. 90-248, §241(c)(6)(A), struck out "IV,".

<sup>9</sup>P.L. 90-248, §241(c)(6)(A), inserted ", and part A of title IV,".



XIV, and XVI for the quarter referred to in such paragraph (3). If the substitution of the average for either of the years referred to in paragraph (4) is chosen by the State, there shall be substituted for the amount determined under clause (B) of paragraph (2) the average of the total expenditures under the plans of the State approved under titles I, IV, X, XIV, and XVI for each quarter in the same fiscal year. For any fiscal year ending on or after June 30, 1967, and before July 1, 1968, in lieu of the substitution provided by paragraph (3) or (4), at the option of the State (i) paragraphs (1) and (2) of this subsection shall be applied on a fiscal year basis (rather than on a quarterly basis), and (ii) the base period fiscal year shall be either the fiscal year ending June 30, 1965, or the fiscal year ending June 30, 1964 (whichever is chosen by the State).<sup>10</sup>

(b) For purposes of this section, expenditures under the plans of any State approved under titles I,<sup>11</sup> X, XIV, XVI, and XIX, and part A of title IV,<sup>12</sup> and the reduction determined with respect thereto under this section, shall be determined on the basis of data furnished by the State in the quarterly reports submitted by the State to the Secretary pursuant to and in accordance with the requirements of the Secretary under title I,<sup>13</sup> X, XIV, XVI, or XIX, or part A of title IV<sup>14</sup>; and determinations so made shall be conclusive for purposes of this section.

(c) If a reduction is required under the preceding provisions of this section in the total of the amounts determined for a State under sections 3, 403, 1003, 1403, 1603, and 1903 for any quarter, the Secretary shall determine which of such amounts shall be reduced and the extent thereof in such manner as in his judgment will best carry out the purpose of maintaining State effort under the Federal-State public assistance programs of the State, and with the total of such reductions to be equal to the reduction required under subsections (a) and (b) of this section.

(d)(1) In the case of the quarters in any fiscal year ending before July 1, 1968, the reduction (if any) under this section shall, at the option of the State, be determined under paragraph (2), (3), or (4) of this subsection instead of under the preceding provisions of this section.

(2) If the reduction determination is made under this paragraph for a State, then—

(A) subsection (a) shall be applied by taking into account only money payments under plans of the State approved under titles I, X, XIV, and XVI, and part A of title IV,

(B) subsection (b) shall be applied by eliminating each reference to title XIX, and

(C) subsection (c) shall be applied by eliminating the reference to section 1903, and by substituting a reference to this paragraph for the reference to subsections (a) and (b).

(3) If the reduction determination is made under this paragraph for a State, then—

(A) subsection (a) shall be applied by taking into account payments under section 523 and section 422,

(B) subsection (b) shall be applied by adding a reference to section 523 and section 422 after each reference to title XIX, and

(C) subsection (c) shall be applied by adding a reference to section 523 and section 422 after the reference to section 1903, and by substituting a reference to this paragraph for the reference to subsections (a) and (b).

(4) If the reduction determination is made under this paragraph for a State, then—

(A) subsection (a) shall be applied by taking into account only (i) money payments under plans of the State approved under titles I, X, XIV, and XVI, and part A of title IV, and (ii) payments under section 523 and section 422,

(B) subsection (b) shall be applied by eliminating each reference to title XIX and substituting a reference to section 523 and section 422, and

(C) subsection (c) shall be applied by eliminating the reference to section 1903 and substituting a reference to section 523 and section 422, and by substituting a reference to this paragraph for the reference to subsections (a) and (b).<sup>15</sup>

SEC. 1812. (a)

(4) outpatient hospital diagnostic services.

SEC. 1813. (a)

(2) The amount payable for outpatient hospital diagnostic services furnished an individual during a diagnostic study shall be reduced by a deduction equal to the sum of (A) one-half of the inpatient hospital deductible which is applicable to spells of illness beginning in the same calendar year as such diagnostic study and (B) 20 per

<sup>10</sup>P.L. 90-248, §221(a), added this sentence.

<sup>11</sup>P.L. 90-248, §241(c)(6)(B), struck out "IV".

<sup>12</sup>P.L. 90-248, §241(c)(6)(C), inserted " , and part A of title IV, ".

<sup>13</sup>See footnote 11.

<sup>14</sup>P.L. 90-248, §241(c)(6)(D), inserted " , or part A of title IV ".

<sup>15</sup>P.L. 90-248, §221(b), added subsection (d).

centum of the remainder of such amount. For purposes of the preceding sentence, a diagnostic study for any individual consists of the outpatient hospital diagnostic services provided by (or under arrangements made by) the same hospital during the 20-day period beginning on the first day (not included in a previous diagnostic study) on which he is entitled to hospital insurance benefits under section 226 and on which outpatient hospital diagnostic services are furnished him.

(2)<sup>16</sup> The amount payable to any provider of services under this part for services furnished an individual during any spell of illness shall be further reduced by an amount equal to the cost of the first three pints of whole blood furnished to him as part of such services during such spell of illness.

SEC. 1814. (a)

(2)

(A) in the case of inpatient hospital services (other than inpatient psychiatric hospital services and inpatient tuberculosis hospital services), such services are or were required to be given on an inpatient basis for such individual's medical treatment, or that inpatient diagnostic study is or was medically required and such services are or were necessary for such purpose;

(F) in the case of outpatient hospital diagnostic services, such services are or were required for diagnostic study;

SEC. 1833.

(b) (2) the amount of any deduction imposed under section 1813(a)(2)(A) with respect to outpatient hospital diagnostic services furnished in any calendar year shall be regarded as an incurred expense under this part for such year.

SEC. 1837.

(b)(1) No individual may enroll for the first time under this part more than 3 years after the close of the first enrollment period during which he could have enrolled under this part.

(e) There shall be a general enrollment period, after the period described in subsection (c), during the period beginning on October 1 and ending on December 31 of each odd-numbered year beginning with 1967.

SEC. 1839.

(b)

(2) The Secretary shall, between July 1 and October 1 of 1967 and of each odd-numbered year thereafter, determine and promulgate the dollar amount which shall be applicable for premiums for months occurring in either of the two succeeding calendar years. Such dollar amount shall be such amount as the Secretary estimates to be necessary so that the aggregate premiums for such two succeeding calendar years will equal one-half of the total of the benefits and administrative costs which he estimates will be payable from the Federal Supplementary Medical Insurance Trust Fund for such two succeeding calendar years. In estimating aggregate benefits payable for any period, the Secretary shall include an appropriate amount for a contingency margin.

SEC. 1842.

(b)

(3)

(B) and (ii) such payment will be made on the basis of a receipted bill, or on the basis of an assignment under the terms of which the reasonable charge is the full charge for the service;

SEC. 1844.

(a) There are authorized to be appropriated from time to time, out of any moneys in the Treasury not otherwise appropriated, to the Federal Supplementary Medical Insurance Trust Fund, a Government contribution equal to the aggregate premiums payable under this part.

SEC. 1861.

### Outpatient Hospital Diagnostic Services

(p) The term "outpatient hospital diagnostic services" means diagnostic services—

(1) which are furnished to an individual as an outpatient by a hospital or by others under arrangements with them made by a hospital; and

(2) which are ordinarily furnished by such hospital (or by others under such arrangements) to its outpatients for the purpose of diagnostic study; excluding, however—

(3) any item or service if it would not be included under subsection (b) if furnished to an inpatient of a hospital; and

<sup>16</sup>P.L. 90-248, §129(c)(3), redesignated the former paragraph (3) as paragraph (2).



(4) any services furnished under such arrangements unless furnished in the hospital or in other facilities operated by or under the supervision of the hospital or its organized medical staff.

## HEALTH INSURANCE BENEFITS ADVISORY COUNCIL

SEC. 1867. For the purpose of advising the Secretary on matters of general policy in the administration of this title and in the formulation of regulations under this title, there is hereby created a Health Insurance Benefits Advisory Council which shall consist of 16 persons, not otherwise in the employ of the United States appointed by the Secretary without regard to the civil service laws. The Secretary shall from time to time appoint one of the members to serve as Chairman. The members shall include persons who are outstanding in fields related to hospital, medical, and other health activities, and at least one person who is representative of the general public. Each member shall hold office for a term of 4 years, except that any member appointed to fill a vacancy occurring prior to the expiration of the term for which his predecessor was appointed shall be appointed for the remainder of such term, and except that the terms of office of the members first taking office shall expire, as designated by the Secretary at the time of appointment, four at the end of the first year, four at the end of the second year, four at the end of the third year, and four at the end of the fourth year after the date of appointment. A member shall not be eligible to serve continuously for more than 2 terms. The Secretary may, at the request of the Council or otherwise, appoint such special advisory professional or technical committees as may be useful in carrying out this title. Members of the Advisory Council and members of any such advisory or technical committee, while attending meetings or conferences thereof or otherwise serving on business of the Advisory Council or of such committee, shall be entitled to receive compensation at rates fixed by the Secretary, but not exceeding \$100 per day, including travel time, and while so serving away from their homes or regular places of business they may be allowed travel expenses, including per diem in lieu of subsistence, as authorized by section 5 of the Administrative Expenses Act of 1946 (5 U.S.C. 73b-2) for persons in the Government service employed intermittently. The Advisory Council shall meet as frequently as the Secretary deems necessary. Upon request of 4 or more members, it shall be the duty of the Secretary to call a meeting of the Advisory Council.

## NATIONAL MEDICAL REVIEW COMMITTEE

SEC. 1868. (a) There is hereby created a National Medical Review Committee (hereinafter in this section referred to as the "Committee") which shall consist of nine persons, not otherwise in the employ of the United States, appointed by the Secretary without regard to the civil service laws. The Secretary shall from time to time appoint one of the members to serve as chairman. The members shall be selected from among individuals who are representative of organizations and associations of professional personnel in the field of medicine and other individuals who are outstanding in the field of medicine or in related fields; except that at least one member shall be representative of the general public, and at least a majority of the members shall be physicians. Each member shall hold office for a term of three years, except that any member appointed to fill a vacancy occurring prior to the expiration of the term for which his predecessor was appointed shall be appointed for the remainder of such term, and except that the terms of office of the members first taking office shall expire, as designated by the Secretary at the time of appointment, three at the end of the first year, three at the end of the second year, and three at the end of the third year after the date of appointment. A member shall not be eligible to serve continuously for more than two terms.

(b) Members of the Committee, while attending meetings or conferences thereof or otherwise serving on business of the Committee, shall be entitled to receive compensation at rates fixed by the Secretary, but not exceeding \$100 per day, including travel time, and while so serving away from their homes or regular places of business they may be allowed travel expenses, including per diem in lieu of subsistence, as authorized by section 5 of the Administrative Expenses Act of 1946 (5 U.S.C. 73b-2) for persons in the Government service employed intermittently.

(c) It shall be the function of the Committee to study the utilization of hospital and other medical care and services for which payment may be made under this title with a view to recommending any changes which may seem desirable in the way in which such care and services are utilized or in the administration of the programs established by this title, or in the provisions of this title. The Committee shall make an annual report to the Secretary of the results of its study, including any recommendations it may have with respect thereto, and such report shall be transmitted promptly by the Secretary to the Congress.

## SUPERSEDED PROVISIONS—SOCIAL SECURITY ACT

(d) The Committee is authorized to engage such technical assistance as may be required to carry out its functions, and the Secretary shall, in addition, make available to the Committee such secretarial, clerical, and other assistance and such pertinent data obtained and prepared by the Department of Health, Education, and Welfare as the Committee may require to carry out its functions.

## SEC. 1902. (a)

(13) provide for inclusion of some institutional and some noninstitutional care and services, and, effective July 1, 1967, provide (A) for inclusion of at least the care and services listed in clauses (1) through (5) of section 1905(a), and (B) for payment of the reasonable cost (as determined in accordance with standards approved by the Secretary and included in the plan) of inpatient hospital services provided under the plan;

(A) for inclusion of some institutional and some noninstitutional care and services, and<sup>17</sup>

(15) in the case of eligible individuals 65 years of age or older who are covered by either or both of the insurance programs established by title XVIII, provide—

(A) for meeting the full cost of any deductible imposed with respect to any such individual under the insurance program established by part A of such title; and

(B) where, under the plan, all of any deductible, cost sharing, or similar charge imposed with respect to any such individual under the insurance program established by part B of such title is not met, the portion thereof which is met shall be determined on a basis reasonably related (as determined in accordance with standards approved by the Secretary and included in the plan) to such individual's income or his income and resources;

---

**Provision of the Social Security Act as in Effect Prior to  
P.L. 90-364, Approved June 28, 1968 (82 Stat. 251)  
Revenue and Expenditure Control Act of 1968**

## SEC. 407.

(b)

(2)

(C) for the denial of aid to families with dependent children to any child or relative specified in subsection (a) if, and for as long as, such child's father—

(i) is not currently registered with the public employment offices in the State, or

(ii) receives unemployment compensation under an unemployment compensation law of a State or of the United States.

---

**Provision of the Social Security Act as in Effect Prior to  
P.L. 91-41, Approved July 9, 1969 (83 Stat. 44)  
[Tariff Schedules—Social Security Act Amendments]**

## SEC. 403.

(d)(1) Notwithstanding any other provision of this Act (except the succeeding paragraphs of this subsection), the average monthly number of dependent children under the age of 18 who have been deprived of parental support or care by reason of the continued absence from the home of a parent with respect to whom payments under this section may be made to a State for any calendar quarter after June 30, 1969, shall not exceed the number which bears the same ratio to the total population of such State under the age of 18 on the first day of the year in which such quarter falls as the average monthly number of such dependent children under the age of 18 with respect to whom payments under this section were made to such State for the calendar quarter beginning January 1, 1968, bore to the total population of such State under the age of 18 on that date.

(2) In the case of any State which is determined by the Secretary to have effectuated, in compliance with or in reliance upon or in consideration of a judicial decision (as defined in paragraph (3)), a policy of providing aid to families with dependent children

<sup>17</sup>P.L. 90-248, §224(a), added this subparagraph (A), effective with respect to calendar quarters beginning after December 31, 1967. Section 224(c)(1), amended subparagraph (A) in its entirety, effective with respect to calendar quarters beginning after June 30, 1970.



under its State plan approved under this part to or on behalf of individuals who, except for such policy, would not be eligible for such aid, the average monthly number of dependent children under the age of 18 who have been deprived of parental support or care by reason of the continued absence from the home of a parent with respect to whom payments under this section were made to the State for the calendar quarter beginning January 1, 1968, shall, for purposes of applying the provisions of paragraph (1), be increased by the average monthly number, in the calendar quarter beginning April 1, 1969, of children under the age of 18 who are deprived of parental support or care by reason of the continued absence from the home of a parent and who by reason of such policy began to receive such aid after March 1968 and received such aid during the calendar quarter beginning April 1, 1969.

(3) As used in paragraph (2), the term "judicial decision" means any decision by a court of the United States of competent jurisdiction in any case or controversy in which there is decided the issue of the validity, under the United States Constitution, of any law, rule, regulation, or policy of a State under which aid to families with dependent children is denied to individuals otherwise eligible therefor because of failure to meet duration of residence requirements or because of the relationship between a male individual and the mother of the child or children with respect to whom such aid is sought.

---

**Provision of the Social Security Act as in Effect Prior to  
P.L. 91-53, Approved August 7, 1969 (83 Stat. 91)  
[Unemployment Security Amendments - 1969]**

**SEC. 901.**

(c)

(3) For purposes of paragraph (1)(A), the limitation on the amount authorized to be made available for any fiscal year is—

(A) in the case of the fiscal year ending June 30, 1964, an amount equal to 95 percent of the amount estimated by the Secretary of the Treasury as the net receipts during such fiscal year under the Federal Unemployment Tax Act, and

(B) in the case of any fiscal year thereafter, an amount equal to 95 percent of the amount estimated and set forth in the Budget of the United States Government for such fiscal year as the net receipts during such year under the Federal Unemployment Tax Act.

Each estimate of net receipts under this paragraph shall be based on a tax rate of 0.4 percent. The Secretary of the Treasury shall report his estimate under subparagraph (A) to the Congress within 30 days after the date of the enactment of this paragraph. Such report shall be printed as a House document.

---

**Provisions of the Social Security Act as in Effect Prior to  
P.L. 91-172, Approved December 30, 1969 (83 Stat. 487)  
Tax Reform Act of 1969**

**Title X—Social Security Amendments of 1969**

**SEC. 202.**

(b)

(2) Except as provided in subsection (q), such wife's insurance benefit for each month shall be equal to whichever of the following is the smaller: (A) one-half of the primary insurance amount of her husband (or, in the case of a divorced wife, her former husband) for such month, or (B) \$105.

(c)

(3) Except as provided in subsection (q), such husband's insurance benefit for each month shall be equal to whichever of the following is the smaller: (A) one-half of the primary insurance amount of his wife for such month, or (B) \$105.

(e)

(4) (A) one-half of the primary insurance amount of the deceased individual on whose wages and self-employment income such benefit is based, or (B) \$105

(f)

(5) (A) one-half of the primary insurance amount of the deceased individual on whose wages and self-employment income such benefit is based, or (B) \$105

## SEC. 203. (a)

(2) when two or more persons were entitled (without the application of section 202(j)(1) and section 223(b)) to monthly benefits under section 202 or 223 for the month of February 1968 on the basis of the wages and self-employment income of such insured individual, such total of benefits for such month or any subsequent month shall not be reduced to less than the larger of—

(A) the amount determined under this subsection without regard to this paragraph, or

(B) an amount equal to the sum of the amounts derived by multiplying the benefit amount determined under this title (including this subsection, but without the application of section 222(b), section 202(q), and subsections (b), (c), and (d) of this section), as in effect prior to February 1968, for each such person for February 1968, by 113 percent and raising each such increased amount, if it is not a multiple of \$0.10, to the next higher multiple of \$0.10;

but in any such case (i) paragraph (1) of this subsection shall not be applied to such total of benefits after the application of subparagraph (B), and (ii) if section 202(k)(2)(A) was applicable in the case of any such benefits for the month of February 1968, and ceases to apply after such month, the provisions of subparagraph (B) shall be applied, for and after the month in which section 202(k)(2)(A) ceases to apply, as though paragraph (1) had not been applicable to such total of benefits for February 1968, or

## SEC. 215.

## (a)

## TABLE FOR DETERMINING PRIMARY INSURANCE AMOUNT AND MAXIMUM FAMILY BENEFITS

I (Primary insurance benefit under 1939 Act, as modified)		II (Primary insurance amount under 1965 Act)	III (Average monthly wage)		IV (Primary insurance amount)	V (Maximum family benefits)
If an individual's primary insurance benefit (as determined under subsec. (d)) is—		Or his primary insurance amount (as determined under subsec. (c)) is—	Or his average monthly wage (as determined under subsec. (b)) is—		The amount referred to in the preceding paragraphs of this subsection shall be—	And the maximum amount of benefits payable (as provided in sec. 203(a)) on the basis of his wages and self-employment income shall be—
At least—	But not more than—		At least—	But not more than—		
	\$15.60	\$48.00		\$74	\$55.00	\$82.50
		or less				
\$15.61	16.20	49.00	\$75	76	55.40	83.10
16.21	16.84	50.00	77	78	56.50	84.80
16.85	17.60	51.00	79	80	57.70	86.60
17.61	18.40	52.00	81	81	58.80	88.20
18.41	19.24	53.00	82	83	59.90	89.90
19.25	20.00	54.00	84	85	61.10	91.70
20.01	20.64	55.00	86	87	62.20	93.30
20.65	21.28	56.00	88	89	63.30	95.00
21.29	21.88	57.00	90	90	64.50	96.80
21.89	22.28	58.00	91	92	65.60	98.40
22.29	22.68	59.00	93	94	66.70	100.10
22.69	23.08	60.00	95	96	67.80	101.70
23.09	23.44	61.00	97	97	69.00	103.50
23.45	23.76	62.10	98	99	70.20	105.30
23.77	24.20	63.20	100	101	71.50	107.30
24.21	24.60	64.20	102	102	72.60	108.90
24.61	25.00	65.30	103	104	73.80	110.70



## SUPERSEDED PROVISIONS—SOCIAL SECURITY ACT

337 03/86

P.L. 91-172 §215. 127

## TABLE FOR DETERMINING PRIMARY INSURANCE AMOUNT AND MAXIMUM FAMILY BENEFITS (Cont.)

I (Primary insurance benefit under 1939 Act, as modified)		II (Primary insurance amount under 1965 Act)	III (Average monthly wage)		IV (Primary insurance amount)	V (Maximum family benefits)
If an individual's primary insurance benefit (as determined under subsec. (d)) is—		Or his primary insurance amount (as determined under subsec. (c)) is—	Or his average monthly wage (as determined under subsec. (b)) is—		The amount referred to in the preceding paragraphs of this subsection shall be—	And the maximum amount of benefits payable (as provided in sec. 203(a)) on the basis of his wages and self-employment income shall be—
At least—	But not more than—		At least—	But not more than—		
25.01	25.48	66.40	105	106	75.10	112.70
25.49	25.92	67.50	107	107	76.30	114.50
25.93	26.40	68.50	108	109	77.50	116.30
26.41	26.94	69.60	110	113	78.70	118.10
26.95	27.46	70.70	114	118	79.90	119.90
27.47	28.00	71.70	119	122	81.10	121.70
28.01	28.68	72.80	123	127	82.30	123.50
28.69	29.25	73.90	128	132	83.60	125.40
29.26	29.68	74.90	133	136	84.70	127.10
29.69	30.36	76.00	137	141	85.90	128.90
30.37	30.92	77.10	142	146	87.20	130.80
30.93	31.36	78.20	147	150	88.40	132.60
31.37	32.00	79.20	151	155	89.50	134.30
32.01	32.60	80.30	156	160	90.80	136.20
32.61	33.20	81.40	161	164	92.00	138.00
33.21	33.88	82.40	165	169	93.20	139.80
33.89	34.50	83.50	170	174	94.40	141.60
34.51	35.00	84.60	175	178	95.60	143.40
35.01	35.80	85.60	179	183	96.80	146.40
35.81	36.40	86.70	184	188	98.00	150.40
36.41	37.08	87.80	189	193	99.30	154.40
37.09	37.60	88.90	194	197	100.50	157.60
37.61	38.20	89.90	198	202	101.60	161.60
38.21	39.12	91.00	203	207	102.90	165.60
39.13	39.68	92.10	208	211	104.10	168.80
39.69	40.33	93.10	212	216	105.20	172.80
40.34	41.12	94.20	217	221	106.50	176.80
41.13	41.76	95.30	222	225	107.70	180.00
41.77	42.44	96.30	226	230	108.90	184.00
42.45	43.20	97.40	231	235	110.10	188.00
43.21	43.76	98.50	236	239	111.40	191.20
43.77	44.44	99.60	240	244	112.60	195.20
44.45	44.88	100.60	245	249	113.70	199.20
44.89	45.60	101.70	250	253	115.00	202.40
		102.80	254	258	116.20	206.40
		103.80	259	263	117.30	210.40
		104.90	264	267	118.60	213.60
		106.00	268	272	119.80	217.60
		107.00	273	277	121.00	221.60
		108.10	278	281	122.20	224.80
		109.20	282	286	123.40	228.80
		110.30	287	291	124.70	232.80
		111.30	292	295	125.80	236.00
		112.40	296	300	127.10	240.00

## SUPERSEDED PROVISIONS—SOCIAL SECURITY ACT

## TABLE FOR DETERMINING PRIMARY INSURANCE AMOUNT AND MAXIMUM FAMILY BENEFITS (Cont.)

I (Primary insurance benefit under 1939 Act, as modified)		II (Primary insurance amount under 1965 Act)	III (Average monthly wage)		IV (Primary insurance amount)	V (Maximum family benefits)
If an individual's primary insurance benefit (as determined under subsec. (d)) is—		Or his primary insurance amount (as determined under subsec. (c)) is—	Or his average monthly wage (as determined under subsec. (b)) is—		The amount referred to in the preceding paragraphs of this subsection shall be—	And the maximum amount of benefits payable (as provided in sec. 203(a)) on the basis of his wages and self-employment income shall be—
At least—	But not more than—		At least—	But not more than—		
		113.50	301	305	128.30	244.00
		114.50	306	309	129.40	247.20
		115.60	310	314	130.70	251.20
		116.70	315	319	131.90	255.20
		117.70	320	323	133.00	258.40
		118.80	324	328	134.30	262.40
		119.90	329	333	135.50	266.40
		121.00	334	337	136.80	269.60
		122.00	338	342	137.90	273.60
		123.10	343	347	139.10	277.60
		124.20	348	351	140.40	280.80
		125.20	352	356	141.50	284.80
		126.30	357	361	142.80	288.80
		127.40	362	365	144.00	292.00
		128.40	366	370	145.10	296.00
		129.50	371	375	146.40	300.00
		130.60	376	379	147.60	303.20
		131.70	380	384	148.90	307.20
		132.70	385	389	150.00	311.20
		133.80	390	393	151.20	314.40
		134.90	394	398	152.50	318.40
		135.90	399	403	153.60	322.40
		137.00	404	407	154.90	325.60
		138.00	408	412	156.00	329.60
		139.00	413	417	157.10	333.60
		140.00	418	421	158.20	336.80
		141.00	422	426	159.40	340.80
		142.00	427	431	160.50	344.80
		143.00	432	436	161.60	348.80
		144.00	437	440	162.80	350.40
		145.00	441	445	163.90	352.40
		146.00	446	450	165.00	354.40
		147.00	451	454	166.20	356.00
		148.00	455	459	167.30	358.00
		149.00	460	464	168.40	360.00
		150.00	465	468	169.50	361.60
		151.00	469	473	170.70	363.60
		152.00	474	478	171.80	365.60
		153.00	479	482	172.90	367.20
		154.00	483	487	174.10	369.20
		155.00	488	492	175.20	371.20
		156.00	493	496	176.30	372.80
		157.00	497	501	177.50	374.80
		158.00	502	506	178.60	376.80



## SUPERSEDED PROVISIONS—SOCIAL SECURITY ACT

337 03/86

P.L. 91-172 §215. 129

## TABLE FOR DETERMINING PRIMARY INSURANCE AMOUNT AND MAXIMUM FAMILY BENEFITS (Cont.)

I (Primary insurance benefit under 1939 Act, as modified)		II (Primary insurance amount under 1965 Act)	III (Average monthly wage)		IV (Primary insurance amount)	V (Maximum family benefits)
If an individual's primary insurance benefit (as determined under subsec. (d)) is—		Or his primary insurance amount (as determined under subsec. (c)) is—	Or his average monthly wage (as determined under subsec. (b)) is—		The amount referred to in the preceding paragraphs of this subsection shall be—	And the maximum amount of benefits payable (as provided in sec. 203(a)) on the basis of his wages and self-employment income shall be—
At least—	But not more than—		At least—	But not more than—		
		159.00	507	510	179.70	378.40
		160.00	511	515	180.80	380.40
		161.00	516	520	182.00	382.40
		162.00	521	524	183.10	384.00
		163.00	525	529	184.20	386.00
		164.00	530	534	185.40	388.00
		165.00	535	538	186.50	389.60
		166.00	539	543	187.60	391.60
		167.00	544	548	188.80	393.60
		168.00	549	553	189.90	395.60
			554	556	191.00	396.80
			557	560	192.00	398.40
			561	563	193.00	399.60
			564	567	194.00	401.20
			568	570	195.00	402.40
			571	574	196.00	404.00
			575	577	197.00	405.20
			578	581	198.00	406.80
			582	584	199.00	408.00
			585	588	200.00	409.60
			589	591	201.00	410.80
			592	595	202.00	412.40
			596	598	203.00	413.60
			599	602	204.00	415.20
			603	605	205.00	416.40
			606	609	206.00	418.00
			610	612	207.00	419.20
			613	616	208.00	420.80
			617	620	209.00	422.40
			621	623	210.00	423.60
			624	627	211.00	425.20
			628	630	212.00	426.40
			631	634	213.00	428.00
			635	637	214.00	429.20
			638	641	215.00	430.80
			642	644	216.00	432.00
			645	648	217.00	433.60
			649	650	218.00	434.40

## Primary Insurance Amount Under 1965 Act

(c)(1) For the purposes of column II of the table appearing in subsection (a) of this section, an individual's primary insurance amount shall be computed on the basis of the law in effect prior to the enactment of the Social Security Amendments of 1967.

**SUPERSEDED PROVISIONS—SOCIAL SECURITY ACT**

130 P.L. 91-373 §901.

337 03/86

(2) The provisions of this subsection shall be applicable only in the case of an individual who became entitled to benefits under section 202(a) or section 223 before the month of February 1968, or who died before such month.

**Provisions of the Social Security Act as in Effect Prior to  
P.L. 91-373, Approved August 10, 1970 (84 Stat. 695)  
Employment Security Amendments of 1970**

**Sec. 901.**

(c)(1) There are hereby authorized to be made available for expenditure out of the employment security administration account for the fiscal year ending June 30, 1964, and for each fiscal year thereafter—

(A) such amounts (not in excess of the limit provided by paragraph (3)) as the Congress may deem appropriate for the purpose of—

(i) assisting the States in the administration of their unemployment compensation laws as provided in title III (including administration pursuant to agreements under any Federal unemployment compensation law, except the Temporary Unemployment Compensation Act of 1958, as amended),

(ii) the establishment and maintenance of systems of public employment offices in accordance with the Act of June 6, 1933, as amended (29 U.S.C., secs. 49-49n), and

(iii) carrying into effect section 2012 of title 38 of the United States Code;

(B) such amounts as the Congress may deem appropriate for the necessary expenses of the Department of Labor for the performance of its functions under—

(i) this title and titles III and XII of this Act,

(ii) the Federal Unemployment Tax Act,

(iii) the provisions of the Act of June 6, 1933, as amended,

(iv) subchapter II of chapter 41 (except section 2012) of title 38 of the United States Code, and

(v) any Federal unemployment compensation law, except the Temporary Unemployment Compensation Act of 1958, as amended.

The term "necessary expenses" as used in this subparagraph (B) shall include the expense of reimbursing a State for salaries and other expenses of employees of such State temporarily assigned or detailed to duty with the Department of Labor and of paying such employees for travel expenses, transportation of household goods, and per diem in lieu of subsistence while away from their regular duty stations in the State, at rates authorized by law for civilian employees of the Federal Government.

(3) For purposes of paragraph (1)(A), the limitation on the amount authorized to be made available for any fiscal year is an amount equal to 95 percent of the amount estimated and set forth in the budget of the United States Government for such fiscal year as the net receipts during such year under the Federal Unemployment Tax Act; except that this limitation is increased by any unexpended amount retained in the employment security administration account in accordance with section 901(f)(2)(B). Each estimate of net receipts under this paragraph shall be based upon a tax rate of 0.4 percent.

(d)

(2) The Secretary of the Treasury is directed to transfer from the employment security administration account—

(A) To the general fund of the Treasury, an amount equal to the amount by which—

(i) 100 per centum of the additional tax received under the Federal Unemployment Tax Act with respect to any State by reason of the reduced credit provision of section 104 of the Temporary Unemployment Compensation Act of 1958, as amended, and covered into the Treasury, exceeds

(ii) the amount transferred to the account of such State pursuant to subparagraph (B) of this paragraph.

(B) To the account (in the Unemployment Trust Fund) of the State with respect to which employers paid such additional tax, an amount equal to the amount by which—

(i) such additional tax received and covered into the Treasury, exceeds

(ii) the total amount restorable to the Treasury under section 104 of the Temporary Unemployment Compensation Act of 1958, as amended, as limited by Public Law 85-457.

(f)

(3) If the entire amount of the excess determined under paragraph (1) as of the close of any fiscal year is not transferred to the Federal unemployment account, there shall be retained (as of the beginning of the succeeding fiscal year) in the employment security administration account so much of the remainder as does not increase the net balance in such account (as of the beginning of such succeeding fiscal year) above \$250,000,000.

TRANSFERS BETWEEN FEDERAL UNEMPLOYMENT ACCOUNT AND  
EMPLOYMENT SECURITY ADMINISTRATION ACCOUNT

Transfers to Federal Unemployment Account

SEC. 902. (a) Whenever the Secretary of the Treasury determines pursuant to section 901(f) that there is an excess in the employment security administration account as of the close of any fiscal year, there shall be transferred (as of the beginning of the succeeding fiscal year) to the Federal unemployment account the total amount of such excess or so much thereof as is required to increase the amount in the Federal unemployment account to whichever of the following is the greater:

(1) \$550,000,000, or

(2) The amount (determined by the Secretary of Labor and certified by him to the Secretary of the Treasury) equal to four-tenths of 1 per centum of the total wages subject to contributions under all State unemployment compensation laws for the calendar year ending during the fiscal year for which the excess is determined.

SEC. 903. (a)(1) Except as provided in subsection (b), whenever, after the application of section 1203 with respect to the excess in the employment security administration account as of the close of any fiscal year, there remains any portion of such excess, the remainder of such excess shall be transferred (as of the beginning of the succeeding fiscal year) to the accounts of the States in the Unemployment Trust Fund.

Establishment of Account

SEC. 905. (a) There is hereby established in the Unemployment Trust Fund a Federal extended compensation account. For the purposes provided for in section 904(e), such account shall be maintained as a separate book account. There are hereby authorized to be appropriated, without fiscal year limitation, such amounts as may be necessary to make the payments of compensation provided by sections 3 and 8 of the Temporary Extended Unemployment Compensation Act of 1961 and the reimbursements provided by section 4 of such Act. The amounts so appropriated shall be transferred from time to time to the Federal extended compensation account on the basis of estimates by the Secretary of the Treasury after consultation with the Secretary of Labor of the amounts required to make such payments and reimbursements. Amounts so transferred shall be repayable advances (without interest), except to the extent that such amounts are used to make the payments of compensation provided by sections 3 and 8 of the Temporary Extended Unemployment Compensation Act of 1961 to individuals by reason of the exhaustion of their rights to unemployment compensation under title XV. Such repayable advances shall be repaid by transfers, from the Federal extended compensation account to the general fund of the Treasury, at such times as the amount in the Federal extended compensation account is determined by the Secretary of the Treasury, in consultation with the Secretary of Labor, to be adequate for such purpose.

Transfers to Account

(b) The Secretary of the Treasury shall transfer (as of the close of each month in the calendar years 1963 and 1964), from the employment security administration account to the Federal extended compensation account established by subsection (a), an amount determined by him to be equal to 50 percent (with respect to the calendar year 1963), or 5/13 (with respect to the calendar year 1964), of the amount by which—

(1) transfers to the employment security administration account pursuant to section 901(b)(2) during such month, exceed

(2) payments during such month from the employment security administration account pursuant to section 901(b)(3) and (d).

If for any such month the payments referred to in paragraph (2) exceed the transfers referred to in paragraph (1), proper adjustments shall be made in the amounts subsequently transferred.



### Transfers to State Accounts

(c)(1) The Secretary of the Treasury shall transfer (as of December 31, 1963), from the Federal extended compensation account to the accounts of the States in the Unemployment Trust Fund, the balance in the Federal extended compensation account as of such date. Such balance shall be determined by deducting from the amount in the account on December 31, 1963, the amount of the outstanding advances made to such account pursuant to subsection (a).

(2) Each State's share of the balance to be transferred under this subsection—

(A) shall be determined by the Secretary of Labor and certified by him to the Secretary of the Treasury before that date on the basis of reports furnished by the States to the Secretary of Labor before December 1, 1963, and

(B) shall bear the same ratio to the balance in such account as of December 31, 1963, as (i) the amount of wages subject to contributions under such State's unemployment compensation law during 1961 and 1962 which have been reported to the State before May 1, 1963, bears to (ii) the total of wages subject to contributions under all State unemployment compensation laws during 1961 and 1962 which have been reported to the States before May 1, 1963.

### Termination of Account

(d) Except as provided by subsection (c), no transfer to or from the Federal extended compensation account shall be made after December 31, 1964.

---

### Provision of the Social Security Act as in Effect Prior to P.L. 91-452, Approved October 15, 1970 (84 Stat. 922) Organized Crime Control Act of 1970

#### SEC. 205.

(f) No person so subpoenaed or ordered shall be excused from attending and testifying or from producing books, records, correspondence, documents, or other evidence on the ground that the testimony or evidence required of him may tend to incriminate him or subject him to a penalty or forfeiture; but no person shall be prosecuted or subjected to any penalty or forfeiture for, or on account of, any transaction, matter, or thing concerning which he is compelled, after having claimed his privilege against self-incrimination, to testify or produce evidence, except that such person so testifying shall not be exempt from prosecution and punishment for perjury committed in so testifying.

---

**Provisions of the Social Security Act as in Effect Prior to****P.L. 92-5, Approved March 17, 1971 (85 Stat. 5)****【Public Debt Limit—Social Security Wage Base】****Sec. 203. (a)**

(2) when two or more persons were entitled (without the application of section 202(j)(1) and section 223(b)) to monthly benefits under section 202 or 223 for January 1970 on the basis of the wages and self-employment income of such insured individual and at least one such person was so entitled for December 1969 on the basis of such wages and self-employment income, such total of benefits for January 1970 or any subsequent month shall not be reduced to less than the larger of—

(A) the amount determined under this subsection without regard to this paragraph, or

(B) an amount equal to the sum of the amounts derived by multiplying the benefit amount determined under this title (including this subsection, but without the application of section 222(b), section 202(q), and subsections (b), (c), and (d) of this section), as in effect prior to the enactment of the Social Security Amendments of 1969 (and prior to January 1, 1970), for each such person for such month, by 115 percent and raising each such increased amount, if it is not a multiple of \$0.10, to the next higher multiple of \$0.10;

but in any such case (i) paragraph (1) of this subsection shall not be applied to such total of benefits after the application of subparagraph (B), and (ii) if section 202(k)(2)(A) was applicable in the case of any such benefits for January 1970, and ceases to apply after such month, the provisions of subparagraph (B) shall be applied, for and after the month in which section 202(k)(2)(A) ceases to apply, as though paragraph (1) had not been applicable to such total of benefits for January 1970, or

## SEC. 215.

(a)

TABLE FOR DETERMINING PRIMARY INSURANCE AMOUNT AND MAXIMUM FAMILY BENEFITS

I (Primary insurance benefit under 1939 Act, as modified)		II (Primary insurance amount under 1967 Act)	III (Average monthly wage)		IV (Primary insurance amount)	V (Maximum family benefits)
If an individual's primary insurance benefit (as determined under subsec. (d)) is—		Or his primary insurance amount (as determined under subsec. (c)) is—	Or his average monthly wage (as determined under subsec. (b)) is—		The amount referred to in the preceding paragraphs of this subsection shall be—	And the maximum amount of benefits payable (as provided in sec. 203(a)) on the basis of his wages and self-employment income shall be—
At least—	But not more than—		At least—	But not more than—		
	\$16.20	\$55.40			\$76	\$96.00
		or less				
\$16.21	16.84	56.50	\$77	78	65.00	97.50
16.85	17.60	57.70	79	80	66.40	99.60
17.61	18.40	58.80	81	81	67.70	101.60
18.41	19.24	59.90	82	83	68.90	103.40
19.25	20.00	61.10	84	85	70.30	105.50
20.01	20.64	62.20	86	87	71.60	107.40
20.65	21.28	63.30	88	89	72.80	109.20
21.29	21.88	64.50	90	90	74.20	111.30
21.89	22.28	65.60	91	92	75.50	113.30
22.29	22.68	66.70	93	94	76.80	115.20
22.69	23.08	67.80	95	96	78.00	117.00
23.09	23.44	69.00	97	97	79.40	119.10
23.45	23.76	70.20	98	99	80.80	121.20
23.77	24.20	71.50	100	101	82.30	123.50
24.21	24.60	72.60	102	102	83.50	125.30
24.61	25.00	73.80	103	104	84.90	127.40
25.01	25.48	75.10	105	106	86.40	129.60
25.49	25.92	76.30	107	107	87.80	131.70
25.93	26.40	77.50	108	109	89.20	133.80
26.41	26.94	78.70	110	113	90.60	135.90
26.95	27.46	79.90	114	118	91.90	137.90
27.47	28.00	81.10	119	122	93.30	140.00
28.01	28.68	82.30	123	127	94.70	142.10
28.69	29.25	83.60	128	132	96.20	144.30
29.26	29.68	84.70	133	136	97.50	146.30
29.69	30.36	85.90	137	141	98.80	148.20
30.37	30.92	87.20	142	146	100.30	150.50
30.93	31.36	88.40	147	150	101.70	152.60
31.37	32.00	89.50	151	155	103.00	154.50
32.01	32.60	90.80	156	160	104.50	156.80
32.61	33.20	92.00	161	164	105.80	158.70
33.21	33.88	93.20	165	169	107.20	160.80
33.89	34.50	94.40	170	174	108.60	162.90
34.51	35.00	95.60	175	178	110.00	165.00
35.01	35.80	96.80	179	183	111.40	167.10
35.81	36.40	98.00	184	188	112.70	169.10
36.41	37.08	99.30	189	193	114.20	171.30
37.09	37.60	100.50	194	197	115.60	173.40
37.61	38.20	101.60	198	202	116.90	175.40



TABLE FOR DETERMINING PRIMARY INSURANCE AMOUNT AND MAXIMUM FAMILY BENEFITS (Cont.)

I (Primary insurance benefit under 1939 Act, as modified)		II (Primary insurance amount under 1967 Act)	III (Average monthly wage)		IV (Primary insurance amount)	V (Maximum family benefits)
If an individual's primary insurance benefit (as determined under subsec. (d)) is— At least— But not more than—		Or his primary insurance amount (as determined under subsec. (c)) is—	Or his average monthly wage (as determined under subsec. (b)) is— At least— But not more than—		The amount referred to in the preceding paragraphs of this subsection shall be—	And the maximum amount of benefits payable (as provided in sec. 203(a) on the basis of his wages and self-employment income shall be—
38.21	39.12	102.90	203	207	118.40	177.60
39.13	39.68	104.10	208	211	119.80	179.70
39.69	40.33	105.20	212	216	121.00	181.50
40.34	41.12	106.50	217	221	122.50	183.80
41.13	41.76	107.70	222	225	123.90	185.90
41.77	42.44	108.90	226	230	125.30	188.00
42.45	43.20	110.10	231	235	126.70	190.10
43.21	43.76	111.40	236	239	128.20	192.30
43.77	44.44	112.60	240	244	129.50	195.20
44.45	44.88	113.70	245	249	130.80	199.20
44.89	45.60	115.00	250	253	132.30	202.40
		116.20	254	258	133.70	206.40
		117.30	259	263	134.90	210.40
		118.60	264	267	136.40	213.60
		119.80	268	272	137.80	217.60
		121.00	273	277	139.20	221.60
		122.20	278	281	140.60	224.80
		123.40	282	286	142.00	228.80
		124.70	287	291	143.50	232.80
		125.80	292	295	144.70	236.00
		127.10	296	300	146.20	240.00
		128.30	301	305	147.60	244.00
		129.40	306	309	148.90	247.20
		130.70	310	314	150.40	251.20
		131.90	315	319	151.70	255.20
		133.00	320	323	153.00	258.40
		134.30	324	328	154.50	262.40
		135.50	329	333	155.90	266.40
		136.80	334	337	157.40	269.60
		137.90	338	342	158.60	273.60
		139.10	343	347	160.00	277.60
		140.40	348	351	161.50	280.80
		141.50	352	356	162.80	284.80
		142.80	357	361	164.30	288.80
		144.00	362	365	165.60	292.00
		145.10	366	370	166.90	296.00
		146.40	371	375	168.40	300.00
		147.60	376	379	169.80	303.20
		148.90	380	384	171.30	307.20
		150.00	385	389	172.50	311.20
		151.20	390	393	173.90	314.40
		152.50	394	398	175.40	318.40
		153.60	399	403	176.70	322.40
		154.90	404	407	178.20	325.60
		156.00	408	412	179.40	329.60

## SUPERSEDED PROVISIONS—SOCIAL SECURITY ACT

136 P.L. 92-5 §215.

337 03/86

TABLE FOR DETERMINING PRIMARY INSURANCE AMOUNT AND MAXIMUM FAMILY BENEFITS (Cont.)

I (Primary insurance benefit under 1939 Act, as modified)	II (Primary insurance amount under 1967 Act)	III (Average monthly wage)	IV (Primary insurance amount)	V (Maximum family benefits)
If an individual's primary insurance benefit (as determined under subsec. (d)) is— At least— But not more than—	Or his primary insurance amount (as determined under subsec. (c)) is—	Or his average monthly wage (as determined under subsec. (b)) is— At least— But not more than—	The amount referred to in the preceding paragraphs of this subsection shall be—	And the maximum amount of benefits payable (as provided in sec. 203(a)) on the basis of his wages and self-employment income shall be—
	157.10	413	417	333.60
	158.20	418	421	336.80
	159.40	422	426	340.80
	160.50	427	431	344.80
	161.60	432	436	348.80
	162.80	437	440	350.40
	163.90	441	445	352.40
	165.00	446	450	354.40
	166.20	451	454	356.00
	167.30	455	459	358.00
	168.40	460	464	360.00
	169.50	465	468	361.60
	170.70	468	473	363.60
	171.80	474	478	365.60
	172.90	479	482	367.20
	174.10	483	487	369.20
	175.20	488	492	371.20
	176.30	493	496	372.80
	177.50	497	501	374.80
	178.60	502	506	376.80
	179.70	507	510	378.40
	180.80	511	515	380.40
	182.00	516	520	382.40
	183.10	521	524	384.00
	184.20	525	529	386.00
	185.40	530	534	388.00
	186.50	535	538	389.60
	187.60	539	543	391.60
	188.80	544	548	393.60
	189.90	549	553	395.60
	191.00	554	556	396.80
	192.00	557	560	398.40
	193.00	561	563	399.60
	194.00	564	567	401.20
	195.00	568	570	402.40
	196.00	571	574	404.00
	197.00	575	577	405.20
	198.00	578	581	406.80
	199.00	582	584	408.00
	200.00	585	588	409.60
	201.00	589	591	410.80
	202.00	592	595	412.40
	203.00	596	598	413.60
	204.00	599	602	415.20
	205.00	603	605	416.40

## SUPERSEDED PROVISIONS—SOCIAL SECURITY ACT

337 03/86

P.L.92-223 §402. 137

## TABLE FOR DETERMINING PRIMARY INSURANCE AMOUNT AND MAXIMUM FAMILY BENEFITS (Cont.)

I	II	III	IV	V
(Primary insurance benefit under 1939 Act, as modified)	(Primary insurance amount under 1967 Act)	(Average monthly wage)	(Primary insurance amount)	(Maximum family benefits)
If an individual's primary insurance benefit (as determined under subsec. (d)) is— At least— But not more than—	Or his primary insurance amount (as determined under subsec. (c)) is—	Or his average monthly wage (as determined under subsec. (b)) is— At least— But not more than—	The amount referred to in the preceding paragraphs of this subsection shall be—	And the maximum amount of benefits payable (as provided in sec. 203(a)) on the basis of his wages and self-employment income shall be—
	206.00	606	609	236.90
	207.00	610	612	238.10
	208.00	613	616	239.20
	209.00	617	620	240.40
	210.00	621	623	241.50
	211.00	624	627	242.70
	212.00	628	630	243.80
	213.00	631	634	245.00
	214.00	635	637	246.10
	215.00	638	641	247.30
	216.00	642	644	248.40
	217.00	645	648	249.60
	218.00	649	650	250.70

## Primary Insurance Amount Under 1967 Act

(c)(1) For the purposes of column II of the table appearing in subsection (a) of this section, an individual's primary insurance amount shall be computed on the basis of the law in effect prior to the enactment of the Social Security Amendments of 1969.

(2) The provisions of this subsection shall be applicable only in the case of an individual who became entitled to benefits under section 202(a) or section 223 before January 1970, or who died before such month.

Provisions of the Social Security Act as in Effect Prior to  
P.L.92-223, Approved December 28, 1971 (85 Stat. 802)  
[Social Security—Lump-Sum Death Payment]

SEC. 402. (a) (15) provide—

(A) for the development of a program for each appropriate relative and development child receiving aid under the plan, and each appropriate individual (living in the same home as a relative and child receiving such aid) whose needs are taken into account in making the determination under clause (7), with the objective of—

(i) assuring, to the maximum extent possible, that such relative, child, and individual will enter the labor force and accept employment so that they will become self-sufficient, and

(ii) preventing or reducing the incidence of births out of wedlock and otherwise strengthening family life,

(B) for the implementation of such programs by—

(i) assuring that such relative, child, or individual who is referred to the Secretary of Labor pursuant to clause (19) is furnished child-care services and that in all appropriate cases family planning services are offered them, and

(ii) in appropriate cases, providing aid to families with dependent children in the form of payments of the types described in section 406(b)(2), and



(C) that the acceptance by such child, relative, or individual of family planning services provided under the plan shall be voluntary on the part of such child, relative, or individual and shall not be a prerequisite to eligibility for or the receipt of any other service or aid under the plan,

(D) for such review of each such program as may be necessary (as frequently as may be necessary, but at least once a year) to insure that it is being effectively implemented,

(E) for furnishing the Secretary with such reports as he may specify showing the results of such programs, and

(F) to the extent that such programs under this clause or clause (14) are developed and implemented by services furnished by the staff of the State agency or the local agency administering the State plan in each of the political subdivisions of the State, for the establishment of a single organizational unit in such State or local agency, as the case may be, responsible for the furnishing of such services;

(19)

(A) for the prompt referral to the Secretary of Labor or his representative for participation under a work incentive program established by part C of—

(i) each appropriate child and relative who has attained age sixteen and is receiving aid to families with dependent children,

(ii) each appropriate individual (living in the same home as a relative and child receiving such aid) who has attained such age and whose needs are taken into account in making the determination under section 402(a)(7), and

(iii) any other person claiming aid under the plan (not included in clauses (i) and (ii), who, after being informed of the work incentive programs established by part C, requests such referral unless the State agency determines that participation in any of such programs would be inimical to the welfare of such person or the family;

except that the State agency shall not so refer a child, relative, or individual under clauses (i) and (ii) if such child, relative, or individual is—

(iv) a person with illness, incapacity, or advanced age,

(v) so remote from any of the projects under the work incentive programs established by part C that he cannot effectively participate under any of such programs,

(vi) a child attending school full time, or

(vii) a person whose presence in the home on a substantially continuous basis is required because of the illness or incapacity of another member of the household;

(E) that, with respect to any individual referred pursuant to subparagraph (A) who is participating in a special work project under the program established by section 432(b)(3), (i) the State agency, after proper notification by the Secretary of Labor, will pay to such Secretary (at such times and in such manner as the Secretary of Health, Education, and Welfare prescribes) the money payments such State would otherwise make to or on behalf of such individual (including such money payments with respect to such individual's family), or 80 per centum of such individual's earnings under such program, whichever is lesser and (ii) the State agency will supplement any earnings received by such individual by payments to such individual (which payments shall be considered aid under the plan) to the extent that such payments when added to the individual's earnings from his participation in such special work project will be equal to the amount of the aid that would have been payable by the State agency with respect to such individual's family had he not participated in such special work project, plus 20 per centum of such individual's earnings from such special work project; and

#### SEC. 432.

(d) Using funds appropriated under this part, the Secretary, in order to carry out the purposes of this part, shall utilize his authority under the Manpower Development and Training Act of 1962, the Act of June 6, 1933, as amended (48 Stat. 113), and other Acts, to the extent such authority is not inconsistent with this Act.

#### SEC. 433.

(b) The Secretary shall develop an employability plan for each suitable person referred to him under section 402 which shall describe the education, training, work experience, and orientation which it is determined that each such person needs to complete in order to enable him to become self-supporting.

(e)

(2)

(A) for the payment by the Secretary to each employer a portion of the wages to be paid by the employer to the individuals for the work performed;

## SUPERSEDED PROVISIONS—SOCIAL SECURITY ACT

337 03/86

P.L.92-223 §1121. 139

(3) The Secretary shall establish one or more accounts in each State with respect to the special work projects established and maintained pursuant to this subsection and place into such accounts the amounts paid to him by the State agency pursuant to section 402(a)(19)(E). The amounts in such accounts shall be available for the payments specified in subparagraph (A) of paragraph (2). At the end of each fiscal year and for such period of time as he may establish, the Secretary shall determine how much of the amounts paid to him by the State agency pursuant to section 402(a)(19)(E) were not expended as provided by the preceding sentence of this paragraph and shall return such unexpended amounts to the State, which amounts shall be regarded as overpayments for purposes of section 403(b)(2).

## RULES AND REGULATIONS

SEC. 439. The Secretary may issue such rules and regulations as he finds necessary to carry out the purposes of this part: *Provided*, That in developing policies for programs established by this part the Secretary shall consult with the Secretary of Health, Education, and Welfare.

## REVIEW OF SPECIAL WORK PROJECTS BY A STATE PANEL

SEC. 442. (a) The Secretary shall make an agreement with any State which is able and willing to do so under which the Governor of the State will create one or more panels to review applications tentatively approved by the Secretary for the special work projects in such State to be established by the Secretary under the program established by section 432(b)(3).

(b) Each such panel shall consist of not more than five and not less than three members, appointed by the Governor. The members shall include one representative of employers and one representative of employees; the remainder shall be representatives of the general public. No special work project under such program developed by the Secretary pursuant to an agreement under section 433(e)(1) shall, in any State which has an agreement under this section, be established or maintained under such program unless such project has first been approved by a panel created pursuant to this section.

## ASSISTANCE IN THE FORM OF INSTITUTIONAL SERVICES IN INTERMEDIATE CARE FACILITIES

SEC. 1121. (a) Any State which has in effect a plan for old-age assistance, approved under title I, a plan for aid to the blind, approved under title X, a plan for aid to the permanently and totally disabled, approved under title XIV, or a plan for aid to the aged, blind, or disabled, approved under title XVI, may, on or after January 1, 1968, modify such plan to include therein benefits in the form of institutional services in intermediate care facilities for individuals who are entitled (or would, if not receiving institutional services in intermediate care facilities, be entitled) to assistance, under such plan, in the form of money payments.

(b) Any modification pursuant to subsection (a) shall provide that benefits in the form of institutional services in intermediate care facilities will be provided only to individuals who—

(1) are entitled (or would, if not receiving institutional services in intermediate care facilities, be entitled) to receive aid or assistance, under the State plan, in the form of money payments;

(2) because of their physical or mental condition (or both), require living accommodations and care which, as a practical matter, can be made available to them only through institutional facilities; and

(3) do not have such an illness, disease, injury, or other condition as to require the degree of care and treatment which a hospital or skilled nursing facility<sup>1</sup> (as that term is employed in title XIX) is designed to provide.

(c) Payments to any State which modifies its approved State plan (referred to in subsection (a)) to provide, to the recipients of aid or assistance thereunder, benefits in the form of institutional services in intermediate care facilities shall be made in the same manner and from the same appropriation as payments made with respect to expenditures under the State plan so modified, except that, with respect to expenditures made by the State in paying the cost of benefits in the form of institutional services in intermediate care facilities for any quarter, the Secretary shall, if the State so elects, pay to each State an amount equal to the Federal medical assistance percentage (as defined in section 1905(b)).

<sup>1</sup>P.L. 92-603, §278(a)(24), struck out "home" and substituted "facility".



(d) Except when inconsistent with the purposes of this section or contrary to any provision of this section, any modification, pursuant to this section, of an approved State plan shall be subject to the same conditions, limitations, rights, and obligations as obtain with respect to such approved State plan.

(e) For purposes of this section, the term "intermediate care facility" means an institution or distinct part thereof which (1) is licensed, under State law, to provide the patients or residents thereof, on a regular basis, the range or level of care and services which is suitable to the needs of individuals described in subsection (b)(2) and (3), but which does not provide the degree of care required to be provided by a skilled nursing facility<sup>2</sup> furnishing services under a State plan approved under title XIX, and (2) meets such standards of safety and sanitation as are applicable to nursing homes under State law; except that in no case shall such term include an institution which does not regularly provide a level of care and service beyond room and board. The term "intermediate care facility" also includes a Christian Science sanatorium operated, or listed and certified, by the First Church of Christ, Scientist, Boston, Massachusetts, but only with respect to institutional services deemed appropriate by the State.

---

**Provisions of the Social Security Act as in Effect Prior to  
P.L. 92-336, Approved July 1, 1972 (86 Stat. 406)  
[Public Debt Limit—Extension]**

**SEC. 203. (a)**

(2) when two or more persons were entitled (without the application of section 202(j)(1) and section 223(b)) to monthly benefits under section 202 or 223 for January 1971 on the basis of the wages and self-employment income of such insured individual and at least one such person was so entitled for December 1970 on the basis of such wages and self-employment income, such total of benefits for January 1971 or any subsequent month shall not be reduced to less than the larger of—

(A) the amount determined under this subsection without regard to this paragraph, or

(B) an amount equal to the sum of the amounts derived by multiplying the benefit amount determined under this title (including this subsection, but without the application of section 222(b), section 202(q), and subsections (b), (c), and (d) of this section), as in effect prior to the amendment of this subsection in March 1971, for each such person for such month, by 110 percent and raising each such increased amount, if it is not a multiple of \$0.10, to the next higher multiple of \$0.10;

but in any such case (i) paragraph (1) of this subsection shall not be applied to such total of benefits after the application of subparagraph (B), and (ii) if section 202(k)(2)(A) was applicable in the case of any such benefits for January 1971, and ceases to apply after such month, the provisions of subparagraph (B) shall be applied, for and after the month in which section 202(k)(2)(A) ceases to apply, as though paragraph (1) had not been applicable to such total of benefits for January 1971, or

(2) when two or more persons were entitled (without the application of section 202(j)(1) and section 223(b)) to monthly benefits under section 202 or 223 for August 1972 on the basis of the wages and self-employment income of such insured individual and the provisions of this subsection were applicable in January 1971 or any prior month in determining the total of the benefits for persons entitled for any such month on the basis of such wages and self-employment income, such total of benefits for September 1972 or any subsequent month shall not be reduced to less than the larger of—

(A) the amount determined under this subsection without regard to this paragraph, or

(B) an amount equal to the sum of the amounts derived by multiplying the benefit amount determined under this title for August 1972 (including this subsection, but without the application of section 222(b), section 202(q), and subsections (b), (c), and (d) of this section), for each such<sup>1</sup> person for such month, by 120 percent and raising such increased amount, if it is not a

<sup>2</sup>See footnote 1.

<sup>1</sup>P.L. 92-603, §144(a)(2), inserted "such".



multiple of \$0.10, to the next higher multiple of \$0.10; but in any such case (i) paragraph (1) of this subsection shall not be applied to such total of benefits after the application of subparagraph (B), and (ii) if section 202(k)(2)(A) was applicable in the case of any such benefits for September 1972, and ceases to apply after such month, the provisions of subparagraph (B) shall be applied, for and after the month in which section 202(k)(2)(A) ceases to apply, as though paragraph (1) had not been applicable to such total of benefits for September 1972.<sup>2</sup>

SEC. 215.

### Primary Insurance Amount

(a) Subject to the conditions specified in subsections (b), (c), and (d) of this section, the primary insurance amount of an insured individual shall be whichever of the following is the largest:

(1) The amount in column IV on the line on which in column III of the following table appears his average monthly wage (as determined under subsection (b));

(2) The amount in column IV on the line on which in column II of the following table appears his primary insurance amount (as determined under subsection (c));

(3) The amount in column IV on the line on which in column I of the following table appears his primary insurance benefit (as determined under subsection (d)); or

(4) In the case of an individual who was entitled to a disability insurance benefit for the month before the month in which he died, became entitled to old-age insurance benefits, or attained age 65, the amount in column IV which is equal to the primary insurance amount upon which such disability insurance benefit is based.

TABLE FOR DETERMINING PRIMARY INSURANCE AMOUNT AND MAXIMUM FAMILY BENEFITS

I (Primary insurance benefit under 1939 Act, as modified)		II (Primary insurance amount under 1969 Act)	III (Average monthly wage)		IV (Primary insurance amount)	V (Maximum family benefits)	
If an individual's primary insurance benefit (as determined under subsec. (d)) is—		Or his primary insurance amount (as determined under subsec. (c)) is—	Or his average monthly wage (as determined under subsec. (b)) is—		The amount referred to in the preceding paragraphs of this subsection shall be—	And the maximum amount of benefits payable (as provided in sec. 203(a)) on the basis of his wages and self-employment income shall be—	
At least—	But not more than—		At least—	But not more than—			
	\$16.20	\$64.00 or less			\$76	\$70.40	\$105.60
\$16.21	16.84	65.00	\$77	78	71.50	107.30	
16.85	17.60	66.40	79	80	73.10	109.70	
17.61	18.40	67.70	81	81	74.50	111.80	
18.41	19.24	68.90	82	83	75.80	113.70	
19.25	20.00	70.30	84	85	77.40	116.10	
20.01	20.64	71.60	86	87	78.80	118.20	
20.65	21.28	72.80	88	89	80.10	120.20	
21.29	21.88	74.20	90	90	81.70	122.60	
21.89	22.28	75.50	91	92	83.10	124.70	
22.29	22.68	76.80	93	94	84.50	126.80	
22.69	23.08	78.00	95	96	85.80	128.70	
23.09	23.44	79.40	97	97	87.40	131.10	
23.45	23.76	80.80	98	99	88.90	133.40	

<sup>2</sup>P.L. 92-336, §201(b), inserted this paragraph (2), applicable with respect to monthly benefits under title II for months after August 1972 and before January 1, 1974. P.L. 92-336, §201(h)(1), struck out "or".

TABLE FOR DETERMINING PRIMARY INSURANCE AMOUNT AND MAXIMUM FAMILY BENEFITS (Cont.)

I  (Primary insurance benefit under 1939 Act, as modified)		II  (Primary insurance amount under 1969 Act)	III  (Average monthly wage)		IV  (Primary insurance amount)	V  (Maximum family benefits)
If an individual's primary insurance benefit (as determined under subsec. (d)) is—		Or his primary insurance amount (as determined under subsec. (c)) is—	Or his average monthly wage (as determined under subsec. (b)) is—		The amount referred to in the preceding paragraphs of this subsection shall be—	And the maximum amount of benefits payable (as provided in sec. 203(a) on the basis of his wages and self-employment income shall be—
At least—	But not more than—		At least—	But not more than—		
23.77	24.20	82.30	100	101	90.60	135.90
24.21	24.60	83.50	102	102	91.90	137.90
24.61	25.00	84.90	103	104	93.40	140.10
25.01	25.48	86.40	105	106	95.10	142.70
25.49	25.92	87.80	107	107	96.60	144.90
25.93	26.40	89.20	108	109	98.20	147.30
26.41	26.94	90.60	110	113	99.70	149.60
26.95	27.46	91.90	114	118	101.10	151.70
27.47	28.00	93.30	119	122	102.70	154.10
28.01	28.68	94.70	123	127	104.20	156.30
28.69	29.25	96.20	128	132	105.90	158.90
29.26	29.68	97.50	133	136	107.30	161.00
29.69	30.36	98.80	137	141	108.70	163.10
30.37	30.92	100.30	142	146	110.40	165.60
30.93	31.36	101.70	147	150	111.90	167.90
31.37	32.00	103.00	151	155	113.30	170.00
32.01	32.60	104.50	156	160	115.00	172.50
32.61	33.20	105.80	161	164	116.40	174.60
33.21	33.88	107.20	165	169	118.00	177.00
33.89	34.50	108.60	170	174	119.50	179.30
34.51	35.00	110.00	175	178	121.00	181.50
35.01	35.80	111.40	179	183	122.60	183.90
35.81	36.40	112.70	184	188	124.00	186.00
36.41	37.08	114.20	189	193	125.70	188.60
37.09	37.60	115.60	194	197	127.20	190.80
37.61	38.20	116.90	198	202	128.60	192.90
38.21	39.12	118.40	203	207	130.30	195.50
39.13	39.68	119.80	208	211	131.80	197.70
39.69	40.33	121.00	212	216	133.10	199.70
40.34	41.12	122.50	217	221	134.80	202.20
41.13	41.76	123.90	222	225	136.30	204.50
41.77	42.44	125.30	226	230	137.90	206.90
42.45	43.20	126.70	231	235	139.40	209.10
43.21	43.76	128.20	236	239	141.10	211.70
43.77	44.44	129.50	240	244	142.50	214.80
44.45	44.88	130.80	245	249	143.90	219.20
44.89	45.60	132.30	250	253	145.60	222.70
		133.70	254	258	147.10	227.10
		134.90	259	263	148.40	231.50
		136.40	264	267	150.10	235.00
		137.80	268	272	151.60	239.40
		139.20	273	277	153.20	243.80
		140.60	278	281	154.70	247.30
		142.00	282	286	156.20	251.70
		143.50	287	291	157.90	256.10
		144.70	292	295	159.20	259.60

## SUPERSEDED PROVISIONS—SOCIAL SECURITY ACT

337 03/86

P.L. 92-336 §215. 143

## TABLE FOR DETERMINING PRIMARY INSURANCE AMOUNT AND MAXIMUM FAMILY BENEFITS (Cont.)

I (Primary insurance benefit under 1939 Act, as modified)		II (Primary insurance amount under 1969 Act)	III (Average monthly wage)		IV (Primary insurance amount)	V (Maximum family benefits)
If an individual's primary insurance benefit (as determined under subsec. (d)) is—		Or his primary insurance amount (as determined under subsec. (c)) is—	Or his average monthly wage (as determined under subsec. (b)) is—		The amount referred to in the preceding paragraphs of this subsection shall be—	And the maximum amount of benefits payable (as provided in sec. 203(a)) on the basis of his wages and self-employment income shall be—
At least—	But not more than—		At least—	But not more than—		
		146.20	296	300	160.90	264.00
		147.60	301	305	162.40	268.40
		148.90	306	309	163.80	272.00
		150.40	310	314	165.50	276.40
		151.70	315	319	166.90	280.80
		153.00	320	323	168.30	284.30
		154.50	324	328	170.00	288.70
		155.90	329	333	171.50	293.10
		157.40	334	337	173.20	296.60
		158.60	338	342	174.50	301.00
		160.00	343	347	176.00	305.40
		161.50	348	351	177.70	308.90
		162.80	352	356	179.10	313.30
		164.30	357	361	180.80	317.70
		165.60	362	365	182.20	321.20
		166.90	366	370	183.60	325.60
		168.40	371	375	185.30	330.00
		169.80	376	379	186.80	333.60
		171.30	380	384	188.50	338.00
		172.50	385	389	189.80	342.40
		173.90	390	393	191.30	345.90
		175.40	394	398	193.00	350.30
		176.70	399	403	194.40	354.70
		178.20	404	407	196.10	358.20
		179.40	408	412	197.40	362.60
		180.70	413	417	198.80	367.00
		182.00	418	421	200.20	370.50
		183.40	422	426	201.80	374.90
		184.60	427	431	203.10	379.30
		185.90	432	436	204.50	383.70
		187.30	437	440	206.10	385.50
		188.50	441	445	207.40	387.70
		189.80	446	450	208.80	389.90
		191.20	451	454	210.40	391.60
		192.40	455	459	211.70	393.80
		193.70	460	464	213.10	396.00
		195.00	465	468	214.50	397.80
		196.40	469	473	216.10	400.00
		197.60	474	478	217.40	402.20
		198.90	479	482	218.80	404.00
		200.30	483	487	220.40	406.20
		201.50	488	492	221.70	408.40
		202.80	493	496	223.10	410.10
		204.20	497	501	224.70	412.30
		205.40	502	506	226.00	414.50
		206.70	507	510	227.40	416.30



## SUPERSEDED PROVISIONS—SOCIAL SECURITY ACT

## TABLE FOR DETERMINING PRIMARY INSURANCE AMOUNT AND MAXIMUM FAMILY BENEFITS (Cont.)

I (Primary insurance benefit under 1939 Act, as modified)		II (Primary insurance amount under 1969 Act)	III (Average monthly wage)		IV (Primary insurance amount)	V (Maximum family benefits)
If an individual's primary insurance benefit (as determined under subsec. (d)) is—		Or his primary insurance amount (as determined under subsec. (c)) is—	Or his average monthly wage (as determined under subsec. (b)) is—		The amount referred to in the preceding paragraphs of this subsection shall be—	And the maximum amount of benefits payable (as provided in sec. 203(a)) on the basis of his wages and self-employment income shall be—
At least—	But not more than—		At least—	But not more than—		
		208.00	511	515	228.80	418.50
		209.30	516	520	230.30	420.70
		210.60	521	524	231.70	422.40
		211.90	525	529	233.10	424.60
		213.30	530	534	234.70	426.80
		214.50	535	538	236.00	428.60
		215.80	539	543	237.40	430.80
		217.20	544	548	239.00	433.00
		218.40	549	553	240.30	435.20
		219.70	554	556	241.70	436.50
		220.80	557	560	242.90	438.80
		222.00	561	563	244.20	439.60
		223.10	564	567	245.50	441.40
		224.30	568	570	246.80	442.70
		225.40	571	574	248.00	444.40
		226.60	575	577	249.30	445.80
		227.70	578	581	250.50	447.50
		228.90	582	584	251.80	448.80
		230.00	585	588	253.00	450.60
		231.20	589	591	254.40	451.90
		232.30	592	595	255.60	453.70
		233.50	596	598	256.90	455.00
		234.60	599	602	258.10	456.80
		235.80	603	605	259.40	458.10
		236.90	606	609	260.60	459.80
		238.10	610	612	262.00	461.20
		239.20	613	616	263.20	462.90
		240.40	617	620	264.50	464.70
		241.50	621	623	265.70	466.00
		242.70	624	627	267.00	467.80
		243.80	628	630	268.20	469.40
		245.00	631	634	269.50	471.70
		246.10	635	637	270.80	473.90
		247.30	638	641	272.10	476.20
		248.40	642	644	273.30	478.30
		249.60	645	648	274.60	480.60
		250.70	649	652	275.80	482.70
			653	656	276.60	484.10
			657	660	277.40	485.50
			661	665	278.40	487.20
			666	670	279.40	489.00
			671	675	280.40	490.70
			676	680	281.40	492.50
			681	685	282.40	494.20
			686	690	283.40	496.00
			691	695	284.40	497.70

## TABLE FOR DETERMINING PRIMARY INSURANCE AMOUNT AND MAXIMUM FAMILY BENEFITS (Cont.)

I	II	III	IV	V
(Primary insurance benefit under 1939 Act, as modified)	(Primary insurance amount under 1969 Act)	(Average monthly wage)	(Primary insurance amount)	(Maximum family benefits)
If an individual's primary insurance benefit (as determined under subsec. (d)) is—	Or his primary insurance amount (as determined under subsec. (c)) is—	Or his average monthly wage (as determined under subsec. (b)) is—	The amount referred to in the preceding paragraphs of this subsection shall be—	And the maximum amount of benefits payable (as provided in sec. 203(a)) on the basis of his wages and self-employment income shall be—
At least—	But not more than—	At least—	But not more than—	
		696	700	285.40
		701	705	286.40
		706	710	287.40
		711	715	288.40
		716	720	289.40
		721	725	290.40
		726	730	291.40
		731	735	292.40
		736	740	293.40
		741	745	294.40
		746	750	295.40
				499.50
				501.20
				503.00
				504.70
				506.50
				508.20
				510.00
				511.70
				513.50
				515.20
				517.00

(b)

(4) The provisions of this subsection shall be applicable only in the case of an individual—

(A) who becomes entitled, after August 1972<sup>3</sup>, to benefits under section 202(a) or section 223; or

(B) who dies after August 1972<sup>4</sup> without being entitled to benefits under section 202(a) or section 223; or

(C) whose primary insurance amount is required to be recomputed under subsection (f)(2).

## Primary Insurance Amount Under 1969 Act

(c)(1) For the purposes of column II of the table appearing in subsection (a) of this section, an individual's primary insurance amount shall be computed on the basis of the law in effect prior to the amendment of this subsection in March 1971.

(2) The provisions of this subsection shall be applicable only in the case of an individual who became entitled to benefits under section 202(a) or section 223 before the date on which this subsection was amended in March 1971, or who died before such date.

Primary Insurance Amount Under Act of March 17, 1971<sup>5</sup>

(c)(1) For the purposes of column II of the table appearing in subsection (a) of this section, an individual's primary insurance amount shall be computed on the basis of the law in effect prior to September 1972.

(2) The provisions of this subsection shall be applicable only in the case of an individual who became entitled to benefits under section 202(a) or section 223 before September 1972, or who died before such month.

<sup>3</sup>P.L. 92-336, §201(d), struck out "December 1970" and substituted "August 1972".

<sup>4</sup>See footnote 3.

<sup>5</sup>P.L. 92-336, §201(e), amended this subsection (c) in its entirety, effective January 1, 1975.

**Provision of the Social Security Act as in Effect Prior to  
P.L. 92-512, Approved October 20, 1972 (86 Stat. 919)  
[Limitation on Grants]**

**SEC. 403. (a)**

(5) in the case of any State, an amount equal to the sum of—

(A) 50 per centum of the total amount expended under the State plan during such quarter as emergency assistance to needy families with children in the form of payments or care specified in paragraph (1) of section 406(e), and

(B) 75 per centum of the total amount expended under the State plan during such quarter as emergency assistance to needy families with children in the form of services specified in paragraph (1) of section 406(e).

**Provisions of the Social Security Act as in Effect Prior to  
P.L. 92-603, Approved October 30, 1972 (86 Stat. 1329)  
Social Security Amendments of 1972**

**SEC. 2. (a)**

(7) provide safeguards which restrict the use or disclosure of information concerning applicants and recipients to purposes directly connected with the administration of the State plan;

**ADMINISTRATION**

**SEC. 5.** There is hereby authorized to be appropriated for the fiscal year ending June 30, 1936, the sum of \$250,000, for all necessary expenses of the Board in administering the provisions of this title.

**SEC. 202.****(b)(1)**

(D) in the case of a divorced wife, was receiving at least one-half of her support, as determined in accordance with regulations prescribed by the Secretary, from such individual, or was receiving substantial contributions from such individual (pursuant to a written agreement) or there was in effect a court order for substantial contributions to her support from such individual—

(i) if he had a period of disability which did not end before the month in which he became entitled to old-age or disability insurance benefits, at the beginning of such period or at the time he became entitled to such benefits, or

(ii) if he did not have such a period of disability, at the time he became entitled to old-age insurance benefits, and

**(d)(1)**

(F) if such child was not under a disability (as so defined) at the time he attained the age of 18, the earlier of—

(i) the first month during no part of which he is a full-time student, or

(ii) the month in which he attains the age of 22, or

(G) if such child was under a disability (as so defined) at the time he attained the age of 18, the third month following the month in which he ceases to be under such disability or (if later) the earlier of—

(i) the first month during no part of which he is a full-time student, or

(ii) the month in which he attains the age of 22.

**(8) In the case of—**

(A) an individual entitled to disability insurance benefits, or

(B) an individual entitled to old-age insurance benefits who was entitled to disability insurance benefits for the month preceding the first month for which he was entitled to old-age insurance benefits,  
a child of such individual adopted after such individual became entitled to such disability insurance benefits shall be deemed not to meet the requirements of clause (i) or (ii) of paragraph (1)(C) unless such child—

(C) is the natural child or stepchild of such individual (including such a child who was legally adopted by such individual), or

(D) was legally adopted by such individual before the end of the 24-month period beginning with the month after the month in which such individual most recently became entitled to disability insurance benefits, but only if—



(i) proceedings for such adoption of the child had been instituted by such individual in or before the month in which began the period of disability of such individual which still exists at the time of such adoption (or, if such child was adopted by such individual after such individual attained age 65, the period of disability of such individual which existed in the month preceding the month in which he attained age 65), or

(ii) such adopted child was living with such individual in such month; or

(E) was legally adopted by such individual—

(i) in an adoption which took place under the supervision of a public or private child-placement agency,

(ii) in an adoption decreed by a court of competent jurisdiction within the United States,

(iii) on a date immediately preceding which such individual had continuously resided for not less than one year within the United States;

(iv) at a time prior to the attainment of age 18 by such child.

(9) If an individual entitled to old-age insurance benefits (but not an individual included under paragraph (8)) adopts a child after such individual becomes entitled to such benefits, such child shall be deemed not to meet the requirements of clause (i) of paragraph (1)(C) unless such child—

(A) is the natural child or stepchild of such individual (including such a child who was legally adopted by such individual), or

(B) was legally adopted by such individual before the end of the 24-month period beginning with the month after the month in which such individual became entitled to old-age insurance benefits, but only if—

(i) such child had been receiving at least one-half of his support from such individual for the year before such individual filed his application for old-age insurance benefits or, if such individual had a period of disability which continued until he had become entitled to old-age insurance benefits, for the year before such period of disability began, and

(ii) either proceedings for such adoption of the child had been instituted by such individual in or before the month in which the individual filed his application for old-age insurance benefits or such adopted child was living with such individual in such month.

(e)(1)

(D) in the case of a surviving divorced wife who was not entitled to wife's insurance benefits on the basis of the wages and self-employment income of such individual for the month preceding the month in which he died, was receiving at least one-half of her support, as determined in accordance with regulations prescribed by the Secretary, from such individual, or was receiving substantial contributions from such individual (pursuant to a written agreement) or there was in effect a court order for substantial contributions to her support from such individual—

(i) at the time of his death (or, if such individual had a period of disability which did not end prior to the month in which he died, at the time such period began or at the time of his death), or

(ii) at the time he became entitled to old-age insurance benefits or disability insurance benefits (or, if such individual had a period of disability which did not end before the month in which he became entitled to such benefits, at the time such period began or at the time he became entitled to such benefits), and

(2) Except as provided in subsection (q) and paragraph (4) of this subsection, such widow's insurance benefit for each month shall be equal to 82  $\frac{1}{2}$  percent of the primary insurance amount of such deceased individual.

(f)

(3) Except as provided in subsection (q) and paragraph (5), such widower's insurance benefit for each month shall be equal to 82  $\frac{1}{2}$  percent of the primary insurance amount of his deceased wife.

(g)(1)

(F)

(i) at the time of such individual's death (or, if such individual had a period of disability which did not end before the month in which he died, at the time such period began or at the time of such death—

(I) she was receiving at least one-half of her support, as determined in accordance with regulations prescribed by the Secretary, from such individual, or

(II) she was receiving substantial contributions from such individual (pursuant to a written agreement), or

(III) there was a court order for substantial contributions to her support from such individual,

(k)

(2)(A) Any child who under the preceding provisions of this section is entitled for any month to more than one child's insurance benefit shall, notwithstanding such provisions, be entitled to only one of such child's insurance benefits for such month, such benefit to be the one based on the wages and self-employment income of the insured individual who has the greatest primary insurance amount.

#### Minimum Survivor's or Dependent's Benefit

(m) In any case in which the benefit of any individual for any month under this section (other than subsection (a)) is, prior to reduction under subsection (k)(3) and subsection (q), less than the first figure in column IV of the table in section 215(a) and no other individual is (without the application of section 202(j)(1)) entitled to a benefit under this section for such month on the basis of the same wages and self-employment income, such benefit for such month shall, prior to reduction under such subsection (k)(3) and subsection (q), be increased to the first figure in column IV of the table in section 215(a).

(q)(1) If the first month for which an individual is entitled to an old-age, wife's, husband's, widow's, or widower's insurance benefit is a month before the month in which such individual attains retirement age, the amount of such benefit for each month shall, subject to the succeeding paragraphs of this subsection, be reduced by—

(a)<sup>1</sup> 5/9 of 1 percent of such amount if such benefit is an old-age, widow's, or widower's insurance benefit, or 25/36 of 1 percent of such amount if such benefit is a wife's or husband's insurance benefit, multiplied by

(B)(i) the number of months in the reduction period for such benefit (determined under paragraph (6)), if such benefit is for a month before the month in which such individual attains retirement age, or

(ii) the number of months in the adjusted reduction period for such benefit (determined under paragraph (7)), if such benefit is for the month in which such individual attains retirement age or for any month thereafter.

A widow's or widower's insurance benefit reduced pursuant to the preceding sentence shall be further reduced by—

(C) 43/198 of 1 percent of the amount of such benefit, multiplied by

(D)(i) the number of months in the additional reduction period for such benefit (determined under paragraph (6)), if such benefit is for a month before the month in which such individual attains retirement age, or

(ii) the number of months in the additional adjusted reduction period for such benefit (determined under paragraph (7)), if such benefit is for the month in which such individual attains retirement age or for any month thereafter.

(3)

(E)

(i) the amount equal to the sum of the amount by which such widow's or widower's insurance benefit was reduced for the month in which such individual attained retirement age and the amount by which such old-age insurance benefit would be reduced under paragraph (1) if it were equal to the excess of such old-age insurance benefit (before reduction under this subsection) over such widow's or widower's insurance benefit (before reduction under this subsection).

(F)

(i) the amount equal to the sum of the amount by which such widow's or widower's insurance benefit was reduced for the month in which such individual attained retirement age and the amount by which such disability insurance benefit would be reduced under paragraph (2) if it were equal to the excess of such disability insurance benefit (before reduction under this subsection) over such widow's or widower's insurance benefit (before reduction under this subsection).

(7) For purposes of this subsection, the "adjusted reduction period" or additional adjusted reduction period for an individual's old-age, wife's, husband's, widow's, or widower's insurance benefit is the reduction period or additional reduction period (as the case may be) prescribed by paragraph (6) for such benefit, excluding from such period—

(9) For purposes of this subsection, the term "retirement age" means age 65 with respect to an old-age, wife's, or husband's insurance benefit and age 62 with respect to a widow's or widower's insurance benefit.

<sup>1</sup>As in original. Possibly should be capitalized.



## SEC. 203.

(f)

(1) (D) for which such individual is entitled to widow's insurance benefits and has not attained age 62 (but only if she became so entitled prior to attaining age 60) or widower's insurance benefits and has not attained age 62, or

(3) For purposes of paragraph (1) and subsection (h), an individual's excess earnings for a taxable year shall be his earnings for such year in excess of the product of \$140 multiplied by the number of months in such year, except that of the first \$1,200 of such excess (or all of such excess if it is less than \$1,200), an amount equal to one-half thereof shall not be included. The excess earnings as derived under the preceding sentence, if not a multiple of \$1, shall be reduced to the next lower multiple of \$1.

## SEC. 210. (a)

(10)

(B) Service performed in the employ of a school, college, or university if such service is performed by a student who is enrolled and is regularly attending classes at such school, college, or university;

## SEC. 214.

(a)

(1)

(A) in the case of a woman, the year in which she died or (if earlier) the year in which she attained age 62,

(B) in the case of a man who has died, the year in which he died or (if earlier) the year in which he attained age 65, or

(C) in the case of a man who has not died, the year in which he attained (or would attain) age 65,

## SEC. 215.

(b)

(3)

(A) in the case of a woman, the year in which she died or if it occurred earlier but after 1960, the year in which she attained age 62,

(B) in the case of a man who has died, the year in which he died or if it occurred earlier but after 1960, the year in which he attained age 65, or

(C) in the case of a man who has not died, the year occurring after 1960 in which he attained (or would attain) age 65.

(f)

(2)

(B) in the case of an individual who died in such year (including any individual whose increase in his primary insurance amount is attributable to compensation which, upon his death, is treated as remuneration for employment under section 205(o)), for monthly benefits beginning with benefits for the month in which he died.

## SEC. 216.

(k)

(1) is accidental, or

(2) occurs in line of duty while he is a member of a uniformed service serving on active duty (as defined in section 210(1)(2)), and he would satisfy such requirement if a three-month period were substituted for the nine-month period; except that this subsection shall not apply if the Secretary determines that at the time of the marriage involved the individual could not have reasonably been expected to live for nine months. For purposes of paragraph (1) of the preceding sentence, the death of an individual is accidental if he receives bodily injuries solely through violent, external, and accidental means and, as a direct result of the bodily injuries and independently of all other causes, loses his life not later than three months after the day on which he receives such bodily injuries.

## SEC. 226.

(a) Every individual who—

(1) has attained the age of 65, and

(2) is entitled to monthly insurance benefits under section 202 or is a qualified railroad retirement beneficiary,

shall be entitled to hospital insurance benefits under part A of title XVIII for each month for which he meets the condition specified in paragraph (2), beginning with the first month after June 1966 for which he meets the conditions specified in paragraphs (1) and (2).

## SEC. 229. (a)

(1) \$100 if the wages actually paid to him in such quarter for such services were \$100 or less,

(2) \$200 if the wages actually paid to him in such quarter for such services were more than \$100 but not more than \$200, or



(3) \$300 in any other case.

SEC. 505. (a)

(6) provides for payment of the reasonable cost (as determined in accordance with standards approved by the Secretary and included in the plan) of inpatient hospital services provided under the plan;

SEC. 1002. (a) (9) provide safeguards which restrict the use or disclosure of information concerning applicants and recipients to purposes directly connected with the administration of aid to the blind;

#### ADMINISTRATION

SEC. 1005. There is hereby authorized to be appropriated for the fiscal year ending June 30, 1936, the sum of \$30,000, for all necessary expenses of the Board in administering the provisions of this title.

### TITLE XI—GENERAL PROVISIONS

SEC. 1402. (a) (9) provide safeguards which restrict the use or disclosure of information concerning applicants and recipients to purposes directly connected with the administration of aid to the permanently and totally disabled;

SEC. 1602. (a)

(7) provide safeguards which restrict the use or disclosure of information concerning applicants and recipients to purposes directly connected with the administration of the plan;

### TITLE XVIII—HEALTH INSURANCE FOR THE AGED

#### PART A—HOSPITAL INSURANCE BENEFITS FOR THE AGED

SEC. 1811. The insurance program for which entitlement is established by section 226 provides basic protection against the costs of hospital and related post-hospital services in accordance with this part for individuals who are age 65 or over and are entitled to retirement benefits under title II of this Act or under the railroad retirement system.

SEC. 1814. (a)

(1) written request, signed by such individual except in cases in which the Secretary finds it impracticable for the individual to do so, is filed for such payment in such form, in such manner, within such time, and by such person or persons as the Secretary may by regulation prescribe;

#### Reasonable Cost of Services

(b) The amount paid to any provider of services with respect to services for which payment may be made under this part shall, subject to the provisions of section 1813, be the reasonable cost of such services, as determined under section 1861(v).

#### Payment for Certain Emergency Hospital Services Furnished Outside the United States

(f) The authority contained in subsection (d) shall be applicable to emergency inpatient hospital services furnished an individual by a hospital located outside the United States if—

(1) such individual was physically present in a place within the United States at the time the emergency which necessitated such inpatient hospital services occurred; and

(2) such hospital was closer to, or substantially more accessible from, such place than the nearest hospital within the United States which was adequately equipped to deal with, and was available for the treatment of, such individual's illness or injury.

#### PART B—SUPPLEMENTARY MEDICAL INSURANCE BENEFITS FOR THE AGED

SEC. 1832. (a)

(2)

(B) medical and other health services (other than physicians' services unless furnished by a resident or intern of a hospital and the services for which payment may be made pursuant to section 1835(b)(2)) furnished by a provider

**SUPERSEDED PROVISIONS—SOCIAL SECURITY ACT**

337 03/86

P.L. 92-603 §1866. 151

of services or by others under arrangements with them made by a provider of services; and

**SEC. 1833. (a)**

(2) in the case of services described in section 1832(a)(2)—80 percent of the reasonable cost of the services (as determined under section 1861(v)).

**SEC. 1835. (a)**

(1) written request, signed by such individual except in cases in which the Secretary finds it impracticable for the individual to do so, is filed for such payment in such form, in such manner, within such time, and by such person or persons as the Secretary may by regulations prescribe; and

**ELIGIBLE INDIVIDUALS**

**SEC. 1836. Every individual who—**

(1) has attained the age of 65, and

(2)(A) is a resident of the United States, and is either (i) a citizen or (ii) an alien lawfully admitted for permanent residence who has resided in the United States continuously during the 5 years immediately preceding the month in which he applies for enrollment under this part, or (B) is entitled to hospital insurance benefits under part A,

is eligible to enroll in the insurance program established by this part.

**SEC. 1837.**

(b)(1) No individual may enroll for the first time under this part unless he does so in a general enrollment period (as provided in subsection (e)) which begins within 3 years after the close of the first enrollment period during which he could have enrolled under this part.

(2) An individual whose enrollment under this part has terminated may not enroll for the second time under this part unless he does so in a general enrollment period (as provided in subsection (e)) which begins within 3 years after the effective date of such termination. No individual may enroll under this part more than twice.

**SEC. 1840.**

(c) In the case of an individual who is entitled both to monthly benefits under section 202 and to an annuity or pension under the Railroad Retirement Act of 1937 at the time he enrolls under this part, subsection (a) shall apply so long as he continues to be entitled both to such benefits and such annuity or pension. In the case of an individual who becomes entitled both to such benefits and such an annuity or pension after he enrolls under this part, subsection (a) shall apply if the first month for which he was entitled to such benefits was the same as or earlier than the first month for which he was entitled to such annuity or pension, and otherwise subsection (b) shall apply.

**SEC. 1844. (a)**

(1) a Government contribution equal to the aggregate premiums payable under this part and deposited in the Trust Fund, and

**SEC. 1861.**

- (f)
- (2) satisfies the requirements of paragraphs (3) through (8) of subsection (e);
- (g)
- (2) satisfies the requirements of paragraphs (3) through (8) of subsection (e);

**SEC. 1865.** Except as provided in the second sentence of section 1863, an institution shall be deemed to meet the requirements of the numbered paragraphs of section 1861(e) (except paragraphs (6) and (8)<sup>2</sup> thereof) if such institution is accredited as a hospital by the Joint Commission on Accreditation of Hospitals. If such Commission, as a condition for accreditation of a hospital, (1) requires a utilization review plan as defined in section 1861(k) or imposes another requirement which serves substantially the same purpose, or (2) requires institutional plans as defined in section 1861(z) or imposes another requirement which serves substantially the same purpose, the Secretary is authorized to find that all institutions so accredited by the Commission comply also with section 1861(e)(6) or 1861(e)(8), as the case may be.<sup>3</sup>

**SEC. 1866.**

- (b)
- (3) in the case of inpatient hospital services (including inpatient tuberculosis hospital services and inpatient psychiatric hospital services) or post-hospital

<sup>2</sup>P.L. 92-603, §234(h)(1), struck out "paragraph (6)" and substituted "paragraphs (6) and (8)".

<sup>3</sup>P.L. 92-603, §234(h)(2), struck out "If such Commission, as a condition for accreditation of a hospital, requires a utilization review plan or imposes another requirement which serves substantially the same purpose, the Secretary is authorized to find that all institutions so accredited by the Commission comply also with section 1861(e)(6)." and substituted this sentence.



extended care services, with respect to such services furnished to any individual who is admitted to the hospital or extended care facility furnishing such services on or after the effective date of such termination,

SEC. 1867. (a) There is hereby created a Health Insurance Benefits Advisory Council which shall consist of 19 persons, not otherwise in the employ of the United States, appointed by the Secretary without regard to the provisions of title 5, United States Code, governing appointments in the competitive service. The Secretary shall from time to time appoint one of the members to serve as Chairman. The members shall include persons who are outstanding in fields related to hospital, medical, and other health activities, persons who are representative of organizations and associations of professional personnel in the field of medicine, and at least one person who is representative of the general public. Each member shall hold office for a term of 4 years, except that any member appointed to fill a vacancy occurring prior to the expiration of the term for which his predecessor was appointed shall be appointed for the remainder of such term. A member shall not be eligible to serve continuously for more than 2 terms. The Secretary may, at the request of the Advisory Council or otherwise, appoint such special advisory professional or technical committees as may be useful in carrying out this title. Members of the Advisory Council and members of any such advisory or technical committee, while attending meetings or conferences thereof or otherwise serving on business of the Advisory Council or of such committee, shall be entitled to receive compensation at rates fixed by the Secretary, but not exceeding \$100 per day, including travel time, and while so serving away from their homes or regular places of business they may be allowed travel expenses, including per diem in lieu of subsistence, as authorized by section 5703 of title 5, United States Code, for persons in the Government service employed intermittently. The Advisory Council shall meet as frequently as the Secretary deems necessary. Upon request of 5 or more members, it shall be the duty of the Secretary to call a meeting of the Advisory Council.

(b) It shall be the function of the Advisory Council (1) to advise the Secretary on matters of general policy in the administration of this title and in the formulation of regulations under this title, and (2) to study the utilization of hospital and other medical care and services for which payment may be made under this title with a view to recommending any changes which may seem desirable in the way in which such care and services are utilized or in the administration of the programs established by this title, or in the provisions of this title. The Advisory Council shall make an annual report to the Secretary on the performance of its functions, including any recommendations it may have with respect thereto, and such report shall be transmitted promptly by the Secretary to the Congress.

(c) The Advisory Council is authorized to engage such technical assistance as may be required to carry out its functions, and the Secretary shall, in addition, make available to the Advisory Council such secretarial, clerical, and other assistance and such pertinent data obtained and prepared by the Department of Health, Education, and Welfare as the Advisory Council may require to carry out its functions.

#### SEC. 1869.

(b) Any individual dissatisfied with any determination under subsection (a) as to entitlement under part A or part B, or as to amount of benefits under part A where the matter in controversy is \$100 or more, shall be entitled to a hearing thereon by the Secretary to the same extent as is provided in section 205(b), and, in the case of a determination as to entitlement or as to amount of benefits where the amount in controversy is \$1,000 or more, to judicial review of the Secretary's final decision after such hearing as is provided in section 205(g).

#### SEC. 1902. (a)

(9) provide for the establishment or designation of a State authority or authorities which shall be responsible for establishing and maintaining standards for private or public institutions in which recipients of medical assistance under the plan may receive care or services;

(13)

(D) for payment of the reasonable cost (as determined in accordance with standards approved by the Secretary and included in the plan) of inpatient hospital services provided under the plan;

(14) provide that (A) in the case of individuals receiving aid or assistance under State plans approved under titles I, X, XIV, XVI, and part A of title IV, no deduction, cost sharing, or similar charge will be imposed under the plan on the individual with respect to inpatient hospital services furnished him under the plan, and (B) any deduction, cost sharing, or similar charge imposed under the plan with respect to inpatient hospital services or any other medical assistance furnished to an individual thereunder, and any enrollment fee, premium, or



similar charge imposed under the plan, shall be reasonably related (as determined in accordance with standards approved by the Secretary and included in the plan) to the recipient's income or his income and resources;

(28) provide that any skilled nursing facility<sup>4</sup> receiving payments under such plan must—

(A) supply to the licensing agency of the State full and complete information as to the identity (i) of each person having (directly or indirectly) an ownership interest of 10 per centum or more in such nursing home, (ii) in case a nursing home is organized as a corporation, of each officer and director of the corporation, and (iii) in case a nursing home is organized as a partnership, of each partner; and promptly report any changes which would affect the current accuracy of the information so required to be supplied;

(B) have and maintain an organized nursing service for its patients, which is under the direction of a professional registered nurse who is employed full-time by such nursing home, and which is composed of sufficient nursing and auxiliary personnel to provide adequate and properly supervised nursing services for such patients during all hours of each day and all days of each week;

(C) make satisfactory arrangements for professional planning and supervision of menus and meal service for patients for whom special diets or dietary restrictions are medically prescribed;

(D) have satisfactory policies and procedures relating to the maintenance of medical records on each patient of the nursing home, dispensing and administering of drugs and biologicals, and assuring that each patient is under the care of a physician and that adequate provisions is<sup>5</sup> made for medical attention to any patient during emergencies;

(E) have arrangements with one or more general hospitals under which such hospital or hospitals will provide needed diagnostic and other services to patients of such nursing home, and under which such hospital or hospitals agree to timely acceptance, as patients thereof, of acutely ill patients of such nursing home who are in need of hospital care; except that the State agency may waive this requirement wholly or in part with respect to any nursing home meeting all the other requirements and which, by reason of remote location or other good and sufficient reason, is unable to effect such an arrangement with a hospital; and

(F)(i) meet (after December 31, 1969) such provisions of the Life Safety Code of the National Fire Protection Association (21st Edition, 1967) as are applicable to nursing homes; except that the State agency may waive in accordance with regulations of the Secretary, for such periods as it deems appropriate, specific provisions of such code which, if rigidly applied, would result in unreasonable hardship upon a nursing home, but only if such agency makes a determination (and keeps a written record setting forth the basis of such determination) that such waiver will not adversely affect the health and safety of the patients of such skilled nursing facility<sup>6</sup>; and except that the requirements set forth in the preceding provisions of this subclause (i) shall not apply in any State if the Secretary finds that in such State there is in effect a fire and safety code, imposed by State law, which adequately protects patients in nursing homes; and (ii) meet conditions relating to environment and sanitation applicable to skilled nursing<sup>7</sup> facilities under title XVIII; except that the State agency may waive in accordance with regulations of the Secretary, for such periods as it deems appropriate, any requirement imposed by the preceding provisions of this subclause (ii) if such agency finds that such requirement, if rigidly applied, would result in unreasonable hardship upon a nursing home, but only if such agency makes a determination (and keeps a written record setting forth the basis of such determination) that such waiver will not adversely affect the health and safety of the patients of such nursing home;

(d) Whenever any State desires a modification of the State plan for medical assistance so as to reduce the scope or extent of the care and services provided as medical assistance under such plan, or to terminate any of such care and services, the Secretary shall, upon application of the State, approve any such modification if the Governor of such State certifies to the Secretary that—

<sup>4</sup>P.L. 92-603, §278(a)(20), struck out "home" and substituted "facility", effective October 30, 1972.

<sup>5</sup>As in original. Possibly should be "are".

<sup>6</sup>See footnote 4.

<sup>7</sup>P.L. 92-603, §278(a)(20), struck out "extended care" and substituted "skilled nursing", effective October 30, 1972.

(1) the average quarterly amount of non-Federal funds expended in providing medical assistance under the plan for any consecutive four-quarter period after the quarter in which such modification takes effect will not be less than the average quarterly amount of such funds expended in providing such assistance for the four-quarter period which immediately precedes the quarter in which such modification is to become effective,

(2) the State is fully complying with the provisions of its State plan (relating to control of utilization and costs of services) which are included therein pursuant to the requirements of subsection (a)(30), and

(3) the modification is not made for the purpose of increasing the standard or other formula for determining payments for those types of care or services which, after such modification, are provided under the State plan, and if the Secretary finds that the State is complying with the provisions of its State plan referred to in clause (2); except that nothing in this subsection shall be construed to authorize any modification in the State plan of any State which would terminate the care or services required to be included pursuant to subsection (a)(13). Any increase in the formula or other standard for determining payments for those types of care or services which, after such modification, are provided under the State plan shall be made only after approval thereof by the Secretary.

#### SEC. 1903. (a)

(4) an amount equal to 100 per centum of the sums expended with respect to costs incurred<sup>a</sup> during such quarter (as found necessary by the Secretary for the proper and efficient administration of the State plan) which are attributable to compensation or training of personnel (of the State agency or any other public agency) responsible for inspecting public or private institutions (or portions thereof) providing long-term care to recipients of medical assistance to determine whether such institutions comply with health or safety standards applicable to such institutions under this Act; plus<sup>a</sup>

(b)(1) Notwithstanding the preceding provisions of this section, the amount determined under such provisions for any State for any quarter which is attributable to expenditures with respect to individuals 65 years of age or older who are patients in institutions for mental diseases shall be paid only to the extent that the State makes a showing satisfactory to the Secretary that total expenditures from Federal, State, and local sources for mental health services (including payments to or in behalf of individuals with mental health problems) under State and local public health and public welfare programs for such quarter exceed the average of the total expenditures from such sources for such services under such programs for each quarter of the fiscal year ending June 30, 1965. For purposes of this subsection, expenditures for such services for each quarter in the fiscal year ending June 30, 1965, in the case of any State shall be determined on the basis of the latest data, satisfactory to the Secretary, available to him at the time of the first determination by him under this subsection for such State; and expenditures for such services for any quarter beginning after December 31, 1965, in the case of any State shall be determined on the basis of the latest data, satisfactory to the Secretary, available to him at the time of the determination under this subsection for such State for such quarter; and determinations so made shall be conclusive for purposes of this subsection.

(e) The Secretary shall not make payments under the preceding provisions of this section to any State unless the State makes a satisfactory showing that it is making efforts in the direction of broadening the scope of the care and services made available under the plan and in the direction of liberalizing the eligibility requirements for medical assistance, with a view toward furnishing by July 1, 1977, comprehensive care and services to substantially all individuals who meet the plan's eligibility standards with respect to income and resources, including services to enable such individuals to attain or retain independence or self-care.

#### SEC. 1905.

(a)

(14) inpatient hospital services and skilled nursing facility<sup>10</sup> services for individuals 65 years of age or over in an institution for tuberculosis or mental diseases;

(d)

(3) the State or political subdivision responsible for the operation of such institution has agreed that the non-Federal expenditures with respect to patients

<sup>a</sup>P.L. 93-223, §18(s), inserted "with respect to costs incurred".

<sup>b</sup>P.L. 92-603, §249B, added this paragraph (4), effective for the period beginning October 1, 1972, and ending June 30, 1974.

P.L. 93-368, §8, extended the effective date through June 30, 1977.

P.L. 95-83, §309(b), extended the effective date through September 30, 1980.

<sup>10</sup>P.L. 92-603, §278(a)(23), struck out "home" and substituted "facility", effective October 30, 1972.



in such institution (or distinct part thereof) will not be reduced because of payments made under this title.

## ADVISORY COUNCIL ON MEDICAL ASSISTANCE

SEC. 1906. For the purpose of advising the Secretary on matters of general policy in the administration of this title (including the relationship of this title and title XVIII) and making recommendations for improvements in such administration, there is hereby created a Medical Assistance Advisory Council which shall consist of twenty-one persons, not otherwise in the employ of the United States, appointed by the Secretary without regard to the provisions of title 5, United States Code, governing appointments in the competitive service. The Secretary shall from time to time appoint one of the members to serve as Chairman. The members shall include representatives of State and local agencies and nongovernmental organizations and groups concerned with health, and of consumers of health services, and a majority of the membership of the Advisory Council shall consist of representatives of consumers of health services. Each member shall hold office for a term of four years, except that any member appointed to fill a vacancy occurring prior to the expiration of the term for which his predecessor was appointed shall be appointed for the remainder of such term, and except that the terms of office of the members first taking office shall expire, as designated by the Secretary at the time of appointment, five at the end of the first year, five at the end of the second year, five at the end of the third year, and six at the end of the fourth year after the date of appointment. A member shall not be eligible to serve continuously for more than two terms. The Secretary may, at the request of the Council or otherwise, appoint such special advisory professional or technical committees as may be useful in carrying out this title. Members of the Advisory Council and members of any such advisory or technical committee, while attending meetings or conferences thereof or otherwise serving on business of the Advisory Council or of such committee, shall be entitled to receive compensation at rates fixed by the Secretary, but not exceeding \$100 per day, including travel time, and while so serving away from their homes or regular places of business they may be allowed travel expenses, including per diem in lieu of subsistence, as authorized by section 5703 of title 5, United States Code, for persons in the Government service employed intermittently. The Advisory Council shall meet as frequently as the Secretary deems necessary. Upon request of five or more members, it shall be the duty of the Secretary to call a meeting of the Advisory Council.

---

**Provision of the Social Security Act as in Effect Prior to**

**P.L. 93-66, Approved July 9, 1973 (87 Stat. 152)**

**【Cost-of-Living Increase in Social Security  
Benefits】**

Sec. 1903.

(j) Notwithstanding the preceding provisions of this section—

(1) in determining the amount payable to any State with respect to expenditures for skilled nursing facility services furnished in any calendar quarter beginning after December 31, 1972, there shall not be included as expenditures under the State plan any amount in excess of the product of (A) the number of inpatient days of skilled nursing facility services provided under the State plan in such quarter, and (B) 105 per centum of the average per diem cost of such services for the fourth calendar quarter preceding such calendar quarter; and

(2) in determining the amount payable to any State with respect to expenditures for intermediate care facility services furnished in any calendar quarter beginning after December 31, 1972, there shall not be included as expenditures under the State plan any amount in excess of the product of (A) the number of inpatient days of intermediate care facility services provided in such quarter under each of the plans of such State approved under titles I, X, XIV, XVI, and XIX, and (B) 105 per centum of the average per diem cost of such services for the fourth calendar quarter preceding such calendar quarter.

For purposes of determining the amount payable to any State with respect to any quarter under paragraphs (1) and (2), the Secretary may by regulation increase the percentage specified in clause (B) of each such paragraph to the extent necessary to take account of increases in per diem costs which result directly from increases in the Federal minimum wage, or which otherwise result directly from cost increases which the Secretary determines are attributable to the upgrading of services and facilities



required by this Act or from provisions of Federal law enacted (or amendments to Federal law made) after the date of the enactment of the Social Security Amendments of 1972.

**Provisions of the Social Security Act as in Effect Prior to  
P.L. 93-233, Approved December 31, 1973 (87 Stat. 947)**  
**〔Social Security Benefits—Increase〕**

## SEC. 201.

(b)

(1) (E) 1.1 per centum of the wages (as so defined) paid after December 31, 1972, and before January 1, 1978, and so reported, (F) 1.15 per centum of the wages (as so defined) paid after December 31, 1977, and before January 1, 2011, and so reported, and (G) 1.5 per centum of the wages (as so defined) paid after December 31, 2010, and so reported.

(2) (E) 0.795 of 1 per centum of the amount of self-employment income (as so defined) so reported for any taxable year beginning after December 31, 1972, and before January 1, 1978, (F) 0.84 per centum of the amount of self-employment income (as so defined) so reported for any taxable year beginning after December 31, 1977, and before January 1, 2011, and (G) 0.895 per centum of the amount of self-employment income (as so defined) so reported for any taxable year beginning after December 31, 2010.

SEC. 203.

(f)

(8)(A) Whenever the Secretary pursuant to section 215(i) increases benefits effective with the first month of the calendar year following a cost-of-living computation quarter, he shall also determine and publish in the Federal Register on or before November 1 of the calendar year in which such quarter occurs (along with the publication of such benefit increase as required by section 215(i)(2)(D)) a new exempt amount which shall be effective (unless such new exempt amount is prevented from becoming effective by subparagraph (C) of this paragraph) with respect to any individual's taxable year which ends with the close of or after the calendar year with the first month of which such benefit increase is effective (or, in the case of an individual who dies during such calendar year, with respect to such individual's taxable year which ends, upon his death, during such year<sup>1</sup>).

SEC. 215.

(a)

TABLE FOR DETERMINING PRIMARY INSURANCE AMOUNT AND MAXIMUM FAMILY BENEFITS<sup>1</sup>

I (Primary insurance benefit under 1939 Act, as modified)		II (Primary insurance amount under 1971 Act)	III (Average monthly wage)		IV (Primary insurance amount)	V (Maximum family benefits)
If an individual's primary insurance benefit (as determined under subsec. (d)) is—		Or his primary insurance amount (as determined under subsec. (c)) is—	Or his average monthly wage (as determined under subsec. (b)) is—		The amount referred to in the preceding paragraphs of this subsection shall be—	And the maximum amount of benefits payable (as provided in sec. 203(a)) on the basis of his wages and self-employment income shall be—
At least—	But not more than—		At least—	But not more than—		
	\$16.20	\$70.40		\$76	\$84.50	\$126.80

<sup>1</sup>As in original. Closing parenthesis is missing.

## SUPERSEDED PROVISIONS—SOCIAL SECURITY ACT

337 03/86

P.L. 93-233 §215.

157

I (Primary insurance benefit under 1939 Act, as modified)		II (Primary insurance amount un- der 1971 Act)	III (Average monthly wage)		IV (Primary insurance amount)	V (Maximum family ben- efits)
If an individual's primary insurance benefit (as deter- mined under subsec. (d)) is—		Or his pri- mary insur- ance amount (as determined under sub- sec. (c)) is—	Or his average monthly wage (as de- termined under sub- sec. (b)) is—		The amount referred to in the pre- ceding para- graphs of this sub- section shall be—	And the maximum amount of benefits payable (as provided in sec. 203(a)) on the basis of his wages and self- employ- ment in- come shall be—
At least—	But not more than—		At least—	But not more than—		
\$16.21	16.84	71.50	\$77	78	85.80	128.80
16.85	17.60	73.10	79	80	87.80	131.70
17.61	18.40	74.50	81	81	89.40	134.20
18.41	19.24	75.80	82	83	91.00	136.50
19.25	20.00	77.40	84	85	92.90	139.40
20.01	20.64	78.80	86	87	94.60	141.90
20.65	21.28	80.10	88	89	96.20	144.30
21.29	21.88	81.70	90	90	98.10	147.20
21.89	22.28	83.10	91	92	99.80	149.70
22.29	22.68	84.50	93	94	101.40	152.20
22.69	23.08	85.80	95	96	103.00	154.50
23.09	23.44	87.40	97	97	104.90	157.40
23.45	23.76	88.90	98	99	106.70	160.10
23.77	24.20	90.60	100	101	108.80	163.20
24.21	24.60	91.90	102	102	110.30	165.50
24.61	25.00	93.40	103	104	112.10	168.20
25.01	25.48	95.10	105	106	114.20	171.30
25.49	25.92	96.60	107	107	116.00	173.90
25.93	26.40	98.20	108	109	117.90	176.90
26.41	26.94	99.70	110	113	119.70	179.60
26.95	27.46	101.10	114	118	121.40	182.10
27.47	28.00	102.70	119	122	123.30	185.00
28.01	28.68	104.20	123	127	125.10	187.70
28.69	29.25	105.90	128	132	127.10	190.70
29.26	29.68	107.30	133	136	128.80	193.20
29.69	30.36	108.70	137	141	130.50	195.80
30.37	30.92	110.40	142	146	132.50	198.80
30.93	31.36	111.90	147	150	134.30	201.50
31.37	32.00	113.30	151	155	136.00	204.00
32.01	32.60	115.00	156	160	138.00	207.00
32.61	33.20	116.40	161	164	139.70	209.60
33.21	33.88	118.00	165	169	141.60	212.40
33.89	34.50	119.50	170	174	143.40	215.20
34.51	35.00	121.00	175	178	145.20	217.80
35.01	35.80	122.60	179	183	147.20	220.80
35.81	36.40	124.00	184	188	148.80	223.20
36.41	37.08	125.70	189	193	150.90	226.40
37.09	37.60	127.20	194	197	152.70	229.10
37.61	38.20	128.60	198	202	154.40	231.60
38.21	39.12	130.30	203	207	156.40	234.60
39.13	39.68	131.80	208	211	158.20	237.30
39.69	40.33	133.10	212	216	159.80	239.70
40.34	41.12	134.80	217	221	161.80	242.70
41.13	41.76	136.30	222	225	163.60	245.40
41.77	42.44	137.90	226	230	165.50	248.30
42.45	43.20	139.40	231	235	167.30	251.00
43.21	43.76	141.10	236	239	169.40	254.10

## SUPERSEDED PROVISIONS—SOCIAL SECURITY ACT

158 P.L. 93-233 §215.

337 03/86

I (Primary insurance benefit under 1939 Act, as modified)		II (Primary insurance amount under 1971 Act)	III (Average monthly wage)		IV (Primary insurance amount)	V (Maximum family ben- efits)
If an individual's primary insurance benefit (as deter- mined under subsec. (d)) is—		Or his pri- mary insur- ance amount (as determined under sub- sec. (c)) is—	Or his average monthly wage (as de- termined under sub- sec. (b)) is—		The amount referred to in the pre- ceding para- graphs of this sub- section shall be—	And the maximum amount of benefits payable (as provided in sec. 203(a)) on the basis of his wages and self- employ- ment in- come shall be—
At least—	But not more than—		At least—	But not more than—		
43.77	44.44	142.50	240	244	171.00	257.80
44.45	44.88	143.90	245	249	172.70	263.10
44.89	45.60	145.60	250	253	174.80	267.30
		147.10	254	258	176.60	272.60
		148.40	259	263	178.10	277.80
		150.10	264	267	180.20	282.00
		151.60	268	272	182.00	287.30
		153.20	273	277	183.90	292.60
		154.70	278	281	185.70	296.80
		156.20	282	286	187.50	302.10
		157.90	287	291	189.50	307.40
		159.20	292	295	191.10	311.60
		160.90	296	300	193.10	316.80
		162.40	301	305	194.90	322.10
		163.80	306	309	196.60	326.40
		165.50	310	314	198.60	331.70
		166.90	315	319	200.30	337.00
		168.30	320	323	202.60	341.20
		170.00	324	328	204.00	346.50
		171.50	329	333	205.80	351.80
		173.20	334	337	207.90	356.00
		174.50	338	342	209.40	361.20
		176.00	343	347	211.20	366.50
		177.70	348	351	213.30	370.70
		179.10	352	356	215.00	376.00
		180.80	357	361	217.00	381.30
		182.20	362	365	218.70	385.50
		183.60	366	370	220.40	390.80
		185.30	371	375	222.40	396.00
		186.80	376	379	224.20	400.40
		188.50	380	384	226.20	405.60
		189.80	385	389	227.80	410.90
		191.30	390	393	229.60	415.10
		193.00	394	398	231.60	420.40
		194.40	399	403	233.30	425.70
		196.10	404	407	235.40	429.90
		197.40	408	412	236.90	435.20
		198.80	413	417	238.60	440.40
		200.20	418	421	240.30	444.60
		201.80	422	426	242.20	449.90
		203.10	427	431	243.80	455.20
		204.50	432	436	245.40	460.50
		206.10	437	440	247.40	462.60
		207.40	441	445	248.90	465.30
		208.80	446	450	250.60	467.90
		210.40	451	454	252.50	470.00
		211.70	455	459	254.10	472.60



## SUPERSEDED PROVISIONS—SOCIAL SECURITY ACT

337 03/86

P.L. 93-233 §215.

159

I (Primary insurance benefit under 1939 Act, as modified)		II (Primary insurance amount un- der 1971 Act)	III (Average monthly wage)		IV (Primary insurance amount)	V (Maximum family ben- efits)
If an individual's primary insurance benefit (as deter- mined under subsec. (d)) is—		Or his pri- mary insur- ance amount (as determined under sub- sec. (c)) is—	Or his average monthly wage (as de- termined under sub- sec. (b)) is—		The amount referred to in the pre- ceding para- graphs of this sub- section shall be—	And the maximum amount of benefits payable (as provided in sec. 203(a)) on the basis of his wages and self- employ- ment in- come shall be—
At least—	But not more than—		At least—	But not more than—		
		213.10	460	464	255.80	475.20
		214.50	465	468	257.40	477.40
		216.10	469	473	259.40	480.00
		217.40	474	478	260.90	482.70
		218.80	479	482	262.60	484.80
		220.40	483	487	264.50	487.50
		221.70	488	492	266.10	490.10
		223.10	493	496	267.80	492.20
		224.70	497	501	269.70	494.80
		226.00	502	506	271.20	497.40
		227.40	507	510	272.90	499.60
		228.80	511	515	274.60	502.20
		230.30	516	520	276.40	504.90
		231.70	521	524	278.10	506.90
		233.10	525	529	279.80	509.60
		234.70	530	534	281.70	512.20
		236.00	535	538	283.20	514.40
		237.40	539	543	284.90	517.00
		239.00	544	548	286.80	519.60
		240.30	549	553	288.40	522.30
		241.70	554	556	290.10	523.80
		242.90	557	560	291.50	526.00
		244.20	561	563	293.10	527.60
		245.50	564	567	294.60	529.70
		246.80	568	570	296.20	531.30
		248.00	571	574	297.60	533.30
		249.30	575	577	299.20	535.00
		250.50	578	581	300.60	537.00
		251.80	582	584	302.20	538.60
		253.00	585	588	303.60	540.80
		*254.40	589	591	305.30	542.30
		255.60	592	595	306.80	544.50
		256.90	596	598	308.30	546.00
		258.10	599	602	309.80	548.20
		259.40	603	605	311.30	549.80
		260.60	606	609	312.80	551.80
		262.00	610	612	314.40	553.50
		263.20	613	616	315.90	555.50
		264.50	617	620	317.40	557.70
		265.70	621	623	318.90	559.20
		267.00	624	627	320.40	561.40
		268.20	628	630	321.90	563.30
		269.50	631	634	323.40	566.10
		270.80	635	637	325.00	568.70
		272.10	638	641	326.60	571.50
		273.30	642	644	328.00	574.00
		274.60	645	648	329.60	576.80

I (Primary insurance benefit under 1939 Act, as modified)		II (Primary insurance amount under 1971 Act)	III (Average monthly wage)		IV (Primary insurance amount)	V (Maximum family benefits)
If an individual's primary insurance benefit (as determined under subsec. (d)) is—		Or his primary insurance amount (as determined under subsec. (c)) is—	Or his average monthly wage (as determined under subsec. (b)) is—		The amount referred to in the preceding paragraphs of this subsection shall be—	And the maximum amount of benefits payable (as provided in sec. 203(a)) on the basis of his wages and self-employment income shall be—
At least—	But not more than—		At least—	But not more than—		
		275.80	649	652	331.00	579.30
		276.60	653	656	332.00	581.00
		277.40	657	660	332.90	582.60
		278.40	661	665	334.10	584.70
		279.40	666	670	335.30	586.80
		280.40	671	675	336.50	588.90
		281.40	676	680	337.70	591.00
		282.40	681	685	338.90	593.10
		283.40	686	690	340.10	595.20
		284.40	691	695	341.30	597.30
		285.40	696	700	342.50	599.40
		286.40	701	705	343.70	601.50
		287.40	706	710	344.90	603.60
		288.40	711	715	346.10	605.70
		289.40	716	720	347.30	607.80
		290.40	721	725	348.50	609.90
		291.40	726	730	349.70	612.00
		292.40	731	735	350.90	614.10
		293.40	736	740	352.10	616.20
		294.40	741	745	353.30	618.30
		295.40	746	750	354.50	620.40
			751	755	355.50	622.20
			756	760	356.50	623.90
			761	765	357.50	625.70
			766	770	358.50	627.40
			771	775	359.50	629.20
			776	780	360.50	630.90
			781	785	361.50	632.70
			786	790	362.50	634.40
			791	795	363.50	636.20
			796	800	364.50	637.90
			801	805	365.50	639.70
			806	810	366.50	641.40
			811	815	367.50	643.20
			816	820	368.50	644.90
			821	825	369.50	646.70
			826	830	370.50	648.40
			831	835	371.50	650.20
			836	840	372.50	651.90
			841	845	373.50	653.70
			846	850	374.50	655.40
			851	855	375.50	657.20
			856	860	376.50	658.90
			861	865	377.50	660.70
			866	870	378.50	662.40
			871	875	379.50	664.20
			876	880	380.50	665.90

## SUPERSEDED PROVISIONS—SOCIAL SECURITY ACT

337 03/86

P.L. 93-233 §215.

161

I (Primary insurance benefit under 1939 Act, as modified)		II (Primary insurance amount un- der 1971 Act)	III (Average monthly wage)		IV (Primary insurance amount)	V (Maximum family ben- efits)
If an individual's primary insurance benefit (as deter- mined under subsec. (d)) is—		Or his pri- mary insur- ance amount (as determined under sub- sec. (c)) is—	Or his average monthly wage (as de- termined under sub- sec. (b)) is—		The amount referred to in the pre- ceding para- graphs of this sub- section shall be—	And the maximum amount of benefits payable (as provided in sec. 203(a)) on the basis of his wages and self- employ- ment in- come shall be—
At least—	But not more than—		At least—	But not more than—		
			881	885	381.50	667.70
			886	890	382.50	669.40
			891	895	383.50	671.20
			896	900	384.50	672.90
			901	905	385.50	674.70
			906	910	386.50	676.40
			911	915	387.50	678.20
			916	920	388.50	679.90
			921	925	389.50	681.70
			926	930	390.50	683.40
			931	935	391.50	685.20
			936	940	392.50	686.90
			941	945	393.50	688.70
			946	950	394.50	690.40
			951	955	395.50	692.20
			956	960	396.50	693.90
			961	965	397.50	695.70
			966	970	398.50	697.40
			971	975	399.50	699.20
			976	980	400.50	700.90
			981	985	401.50	702.70
			986	990	402.50	704.40
			991	995	403.50	706.20
			996	1,000	404.50	707.90

<sup>1</sup>P.L. 92-336, §201(a), deleted the former table and inserted the revised table as shown, applicable with respect to monthly benefits under title II of the Social Security Act for months after August 1972 and with respect to lump-sum death payments under such title in the case of deaths occurring after August 1972.

<sup>2</sup>P.L. 92-603, §144(a), struck out "251.40", and "699" and substituted "254.40" and "696", respectively.



(i)(1)

(A) (i) the calendar quarter ending on June 30 in each year after 1972, or

(2)

(E) Notwithstanding a determination by the Secretary under subparagraph (A) that a base quarter in any calendar year is a cost-of-living computation quarter (and notwithstanding any notification or publication thereof under subparagraph (C) or (D)), no increase in benefits shall take effect pursuant thereto, and such quarter shall be deemed not to be a cost-of-living computation quarter, if during the calendar year in which such determination is made a law providing a general benefit increase under this title is enacted or becomes effective.

SEC. 1611.

#### Certain Individuals Deemed to Meet Resources Test

(g) In the case of any individual or any individual and his spouse (as the case may be) who for the month of December 1973 was a recipient of aid or assistance under a State plan approved under title I, X, XIV, or XVI, the resources of such individual or such individual and his spouse shall be deemed not to exceed the amount specified in sections 1611(a)(1)(B) and 1611(a)(2)(B) during any period that the resources of such individual or individual and his spouse (as the case may be) does not exceed the maximum amount of resources, as specified in the State plan (above referred to, and as in effect in October 1972) under which he or they were entitled to aid or assistance for the month of December 1972.

#### Certain Individuals Deemed to Meet Income Test

(h) In determining eligibility for, and the amount of, benefits payable under this section in the case of any individual or any individual and his spouse (as the case may be) who is blind (as that term is defined under a State plan approved under title X or XVI as in effect in October 1972) and who for the month of December 1973 was a recipient of aid or assistance under a State plan approved under title X or XVI, there shall be disregarded an amount equal to the greater of the amounts determined as follows—

(1) the maximum amount of any earned or unearned income which could have been disregarded under the State plan (above referred to, and as in effect in October 1972), or

(2) the amount which would be required to be disregarded under section 1612 without application of this subsection.

SEC. 1814. (a)

(2)

(E) in the case of inpatient hospital services in connection with a dental procedure, the individual suffers from impairments of such severity as to require hospitalization;

SEC. 1832. (a)

(2)

(B)

(i)

(II) a physician to a patient in a hospital which has a teaching program approved as specified in paragraph (6) of section 1861(b) (including services in conjunction with the teaching programs of such hospital whether or not such patient is an inpatient of such hospital), unless either clause (A) or (B) of paragraph (7) of such section is met, and<sup>2</sup>

(II) a physician to a patient in a hospital which has a teaching program approved as specified in paragraph (6) of section 1861(b) (including services in conjunction with the teaching programs of such hospital whether or not such patient is an inpatient of such hospital), where the conditions specified in paragraph (7) of such section are met, and<sup>3</sup>

SEC. 1861.

(b)

(7) a physician where the hospital has a teaching program approved as specified in paragraph (6), unless (A) such inpatient is a private patient (as defined in

<sup>2</sup>P.L. 93-233, §15(a)(2), amended 1832(a)(2)(B)(i)(II) in its entirety, to apply with respect to cost accounting periods beginning June 30, 1973 and prior to January 1, 1975.

P.L. 93-368, §7(c), extended the applicability of this provision to July 1, 1976.

P.L. 94-368, §1, extended the applicability of this provision to October 1, 1977.

<sup>3</sup>Effective October 1, 1977, this 1832(a)(2)(B)(i)(III) was reinstated.

regulations), or (B) the hospital establishes that during the two-year period ending December 31, 1967, and each year thereafter all inpatients have been regularly billed by the hospital for services rendered by physicians and reasonable efforts have been made to collect in full from all patients and payment of reasonable charges (including applicable deductibles and coinsurance) has been regularly collected in full or in substantial part from at least 50 percent of all inpatients.<sup>4</sup>

(7) a physician where the hospital has a teaching program approved as specified in paragraph (6), if (A) the hospital elects to receive any payment due under this title for reasonable costs of such services, and (B) all physicians in such hospital agree not to bill charges for professional services rendered in such hospital to individuals covered under the insurance program established by this title.<sup>5</sup>

## SEC. 1876.

(g)

(2) (ii) the actuarial value of other charges made in lieu of such deductible and coinsurance.

## SEC. 1902. (a)

(10) provide for making medical assistance available to all individuals receiving aid or assistance under State plans approved under titles, I, X, XIV, and XVI, and part A of title IV; and—

(A) provide that the medical assistance made available to individuals receiving aid or assistance under any such State plan—

(i) shall not be less in amount, duration, or scope than the medical assistance made available to individuals receiving aid or assistance under any other such State plan, and

(ii) shall not be less in amount, duration, or scope than the medical or remedial care and services made available to individuals not receiving aid or assistance under any such plan; and

(B) if medical or remedial care and services are included for any group of individuals who are not receiving aid or assistance under any such State plan and who do not meet the income and resources requirements of the one of such State plans which is appropriate, as determined in accordance with standards prescribed by the Secretary, provide—

(i) for making medical or remedial care and services available to all individuals who would, if needy, be eligible for aid or assistance under any such State plan and who have insufficient (as determined in accordance with comparable standards) income and resources to meet the costs of necessary medical or remedial care and services, and

(ii) that the medical or remedial care and services made available to all individuals not receiving aid or assistance under any such State plan shall be equal in amount, duration, and scope;

except that (I) the making available of the services described in paragraph (4) or (14) of section 1905 (a) to individuals meeting the age requirement prescribed therein shall not, by reason of this paragraph (10), require the making available of any such services, or the making available of such services of the same amount, duration, and scope, to individuals of any other ages, and (II) the making available of supplementary medical insurance benefits under part B of title XVIII to individuals eligible therefor (either pursuant to an agreement entered into under section 1843 or by reason of the payment of premiums under such title by the State agency on behalf of such individuals), or provision for meeting part or all of the cost of the deductibles, cost sharing, or similar charges under part B of title XVIII for individuals eligible for benefits under such part, shall not, by reason of this paragraph (10), require the making available of any such benefits, or the making available of services of the same amount, duration, and scope, to any other individuals;

(e) Notwithstanding any other provision of this title, effective January 1, 1974, each State plan approved under this title must provide that each family which was eligible for assistance pursuant to part A of title IV in at least 3 of the 6 months immediately preceding the month in which such family became ineligible for such assistance because of increased income from employment, shall, while a member of such family is employed, remain eligible for such assistance for 4 calendar months following the month in which such family would otherwise be determined to be ineligible for such assistance because of the income and resources limitations contained in such plan.

<sup>4</sup>P.L. 93-233, §15(a)(1), amended §1861(b)(7) in its entirety, to apply with respect to cost accounting periods beginning June 30, 1973 and prior to January 1, 1975.

P.L. 93-368, §7(c), extended the applicability of this provision to July 1, 1976.

P.L. 94-368, §1, extended the applicability of this provision to October 1, 1977.

<sup>5</sup>Effective October 1, 1977, this §1861(b)(7) was reinstated.



## SEC. 1903.

(c)(1) If the Secretary finds, on the basis of satisfactory information furnished by a State, that the Federal medical assistance percentage for such State applicable to any quarter in the period beginning January 1, 1966, and ending with the close of June 30, 1969, is less than 105 per centum of the Federal share of medical expenditures by the State during the fiscal year ending June 30, 1965 (as determined under paragraph (2)), then 105 per centum of such Federal share shall be the Federal medical assistance percentage (instead of the percentage determined under section 1905(b)) for such State for such quarter and each quarter thereafter occurring in such period and prior to the first quarter with respect to which such a finding is not applicable.

(2) For purposes of paragraph (1), the Federal share of medical expenditures by a State during the fiscal year ending June 30, 1965, means the percentage which the excess of—

(A) the total of the amounts determined under sections 3, 403, 1003, 1403, and 1603 with respect to expenditures by such State during such year as aid or assistance under its State plans approved under titles I, IV, X, XIV, and XVI, over

(B) the total of the amounts which would have been determined under such sections with respect to such expenditures during such year if expenditures as aid or assistance in the form of medical or any other type of remedial care had not been counted,

is of the total expenditures as aid or assistance in the form of medical or any other type of remedial care under such plans during such year.

## (f)

(4) The limitations on payment imposed by the preceding provisions of this subsection shall not apply with respect to any amount expended by a State as medical assistance for any individual who, at the time of the provision of the medical assistance giving rise to such expenditure—

(A) is a recipient of aid or assistance under a plan of such State which is approved under title I, X, XIV, or XVI, or part A of title IV, or

(B) is not a recipient of aid or assistance under such a plan but (i) is eligible to receive such aid or assistance, or (ii) would be eligible to receive such aid or assistance if he were not in a medical institution.

## SEC. 1908.

## (d)

(1) such waiver is for a period which ends after being in effect for two years or on June 30, 1972, whichever is earlier, and

(2) there is provided in the State (during all of the period for which waiver is in effect), a program of training and instruction designed to enable all individuals, with respect to whom any such waiver is granted, to attain the qualifications necessary in order to meet such standards.

(e)(1) There are hereby authorized to be appropriated for fiscal year 1968 and the four succeeding fiscal years such sums as may be necessary to enable the Secretary to make grants to States for the purpose of assisting them in instituting and conducting programs of training and instruction of the type referred to in subsection (d)(2).

(2) No grant with respect to any such program shall exceed 75 per centum of the reasonable and necessary cost, as determined by the Secretary, of instituting and conducting such program.

(f)(1) For the purpose of advising the Secretary and the States in carrying out the provisions of this section, there is hereby created a National Advisory Council on Nursing Home Administration which shall consist of nine persons, not otherwise in the employ of the United States, appointed by the Secretary without regard to the provisions of title 5, United States Code, governing appointments in the competitive service. The Secretary shall from time to time appoint one of the members to serve as Chairman. The members shall include, but not be limited to, representatives of State health officers, State welfare directors, nursing home administrators, and university programs in public health or medical care administration.

(2) In addition to the function stated in paragraph (1) of this subsection, it shall be the function and duty of the Council (A) to study and identify the core of knowledge that should constitute minimally the training in the field of institutional administration which should qualify an individual to serve as a nursing home administrator; (B) to study and identify the experience in the field of institutional administration that a nursing home administrator should be required to possess; (C) to study and develop model techniques for determining whether an individual possesses such qualifications; (D) to study and develop model criteria for granting waivers under the provisions of subsection (d); (E) to study and develop suggested programs of training referred to in subsection (d); (F) to study, develop, and recommend programs of training and instruction for those desiring to pursue a career in nursing home administration; (G)



to complete the functions in (A) through (E) above by July 1, 1969, and submit a written report to the Secretary which report shall be submitted to the States to assist them in carrying out the provisions of this section.

(3) Members of the Council, while attending meetings or conferences thereof or otherwise serving on business of the Council shall be entitled to receive compensation at rates fixed by the Secretary, but not exceeding \$100 per day, including travel time, and while so serving away from their homes or regular places of business they may be allowed travel expenses, including per diem in lieu of subsistence, as authorized by section 5703 of title 5, United States Code, for persons in the Government service employed intermittently.

(4) The Secretary may at the request of the Council engage such technical assistance as may be required to carry out its functions; and the Secretary shall, in addition, make available to the Council such secretarial, clerical, and other assistance and such pertinent data obtained and prepared by the Department of Health, Education, and Welfare as the Council may require to carry out its functions.

(5) The Council shall be appointed by the Secretary prior to July 1, 1968, and shall cease to exist as of December 31, 1971.

---

**Provision of the Social Security Act as in Effect Prior to  
P.L. 93-368, Approved August 7, 1974 (88 Stat. 420)**

**[Vessels—Equipment and Repairs—Emergency Unemployment Compensation]**

SEC. 903.

(b)

(3) The amount which, but for this paragraph, would be transferred to the account of a State under subsection (a) or paragraph (1) of this subsection shall (after applying paragraph (2) of this subsection) be reduced (but not below zero) by the balance of that portion of the advances made under section 204(b) of the Emergency Unemployment Compensation Act of 1971 which was used for payments to such State under section 203 of such Act. An amount equal to the sum by which such amount is reduced shall be transferred to the general fund of the Treasury. Any amount transferred as a repayment under this paragraph shall be credited against, and shall operate to reduce, any balance repayable under this paragraph by the State to which (but for this paragraph) such amount would have been payable. No reduction shall be made under this subsection in the amount transferable to the account of any State by reason of emergency compensation paid to any individual for a week of unemployment ending after June 30, 1972.

---

**Provision of the Social Security Act as in Effect Prior to  
P.L. 93-484, Approved October 26, 1974 (88 Stat. 1459)**

**[Tariffs—Medicare Appeals]**

SEC. 1878.

(f) A decision of the Board shall be final unless the Secretary, on his own motion, and within 60 days after the provider of services is notified of the Board's decision, reverses or modifies (adversely to such provider) the Board's decision. In any case where such a reversal or modification occurs the provider of services may obtain a review of such decision by a civil action commenced within 60 days of the date he is notified of the Secretary's reversal or modification. Such action shall be brought in the district court of the United States for the judicial district in which the provider is located or in the District Court for the District of Columbia and shall be tried pursuant to the applicable provisions under chapter 7 of title 5, United States Code, notwithstanding any other provisions in section 205.

---

**Provision of the Social Security Act as in Effect Prior to  
P.L. 93-608, Approved January 2, 1975 (88 Stat. 1967)  
[Reports to Congress]**

**SEC. 1120.**

(b) As soon as possible after the approval of any project under subsection (a), the Secretary shall submit to the Congress a description of such project including a statement of its purpose, probable cost, and expected duration.

**Provisions of the Social Security Act as in Effect Prior to  
P.L. 93-647, Approved January 4, 1975 (88 Stat. 2337)  
Social Services Amendments of 1974**

SEC. 402. (a) (9) provide safeguards which restrict the use or disclosure of information concerning applicants and recipients to purposes directly connected with the administration of aid to families with dependent children; (11) effective July 1, 1952, provide for prompt notice to appropriate law-enforcement officials of the furnishing of aid to families with dependent children in respect of a child who has been deserted or abandoned by a parent; (17) provide—

(A) for the development and implementation of a program under which the State agency will undertake—

(i) in the case of a child born out of wedlock who is receiving aid to families with dependent children, to establish the paternity of such child and secure support for him, and

(ii) in the case of any child receiving such aid who has been deserted or abandoned by his parent, to secure support for such child from such parent (or from any other person legally liable for such support), utilizing any reciprocal arrangements adopted with other States to obtain or enforce court orders for support, and

(B) for the establishment of a single organizational unit in the State agency or local agency administering the State plan in each political subdivision which will be responsible for the administration of the program referred to in clause (A);

(18) provide for entering into cooperative arrangements with appropriate courts and law enforcement officials (A) to assist the State agency in administering the program referred to in clause (17)(A), including the entering into of financial arrangements with such courts and officials in order to assure optimum results under such program, and (B) with respect to any other matters of common concern to such courts or officials and the State agency or local agency administering the State plan; (21) provide that the State agency will report to the Secretary, at such times (not less often than once each calendar quarter) and in such manner as the Secretary may prescribe—

(A) the name, and social security account number, if known, of each parent of a dependent child or children with respect to whom aid is being provided under the State plan—

(i) against whom an order for the support and maintenance of such child or children has been issued by a court of competent jurisdiction but who is not making payments in compliance or partial compliance with such order, or against whom a petition for such an order has been filed in a court having jurisdiction to receive such petition, and

(ii) whom it has been unable to locate after requesting and utilizing information included in the files of the Department of Health, Education, and Welfare maintained pursuant to section 205,

(B) the last known address of such parent and any information it has with respect to the date on which such parent could last be located at such address, and

(C) such other information as the Secretary may specify to assist in carrying out the provisions of section 410;

(22) provide that the State agency will, in accordance with standards prescribed by the Secretary, cooperate with the State agency administering or supervising the administration of the plan of another State under this part—

(A) in locating a parent residing in such State (whether or not permanently) against whom a petition has been filed in a court of competent jurisdiction of such other State for the support and maintenance of a child or children of such parent with respect to whom aid is being provided under the plan of such other State, and in securing compliance or good faith partial compliance by a parent residing in such State (whether or not permanently) with an order issued by a court of competent jurisdiction against such parent for the support and maintenance of a child or children of such parent with respect to whom aid is being provided under the plan of such other State; and



## ASSISTANCE BY INTERNAL REVENUE SERVICE IN LOCATING PARENTS

SEC. 410. (a) Upon receiving a report from a State agency made pursuant to section 402(a)(21), the Secretary shall furnish to the Secretary of the Treasury or his delegate the names and social security account numbers of the parents contained in such report, and the name of the State agency which submitted such report. The Secretary of the Treasury or his delegate shall endeavor to ascertain the address of each such parent from the master files of the Internal Revenue Service, and shall furnish any address so ascertained to the State agency which submitted such report.

(b) There are hereby authorized to be appropriated such sums as may be necessary to carry out the provisions of subsection (a). The Secretary shall transfer to the Secretary of the Treasury from time to time sufficient amounts out of the monies appropriated pursuant to this subsection to enable him to perform his functions under subsection (a).

## TITLE VI—GRANTS TO STATES FOR SERVICES TO THE AGED, BLIND, OR DISABLED

## APPROPRIATION

SEC. 601. For the purpose of encouraging each State, as far as practicable under the conditions in such State, to furnish rehabilitation and other services to help needy individuals who are 65 years of age or over, are blind, or are disabled to attain or retain capability for self-support or self-care, there is hereby authorized to be appropriated for each fiscal year, subject to section 1130, a sum sufficient to carry out the purposes of this title. The sums made available under this section shall be used for making payments to States which have submitted, and had approved by the Secretary of Health, Education, and Welfare, State plans for services to the aged, blind, or disabled.

## STATE PLANS FOR SERVICES TO THE AGED, BLIND, OR DISABLED

SEC. 602. (a) A State plan for services to the aged, blind, or disabled, must—

(1) except to the extent permitted by the Secretary, provide that it shall be in effect in all political subdivisions of the State, and if administered by them, be mandatory upon them;

(2) provide for financial participation by the State;

(3) either provide for the establishment or designation of a single State agency to administer the plan, or provide for the establishment or designation of a single State agency to supervise the administration of the plan;

(4) provide (A) such methods of administration (including methods relating to the establishment and maintenance of personnel standards on a merit basis, except that the Secretary shall exercise no authority with respect to the selection, tenure of office, and compensation of any individual employed in accordance with such methods) as are found by the Secretary to be necessary for the proper and efficient operation of the plan, and (B) for the training and effective use of paid subprofessional staff, with particular emphasis on the full-time or part-time employment of persons of low income, as community service aides, in the administration of the plan and for the use of nonpaid or partially paid volunteers in a social service volunteer program in providing services under the plan and in assisting any advisory committees established by the State agency;

(5) provide that the State agency will make such reports, in such form and containing such information, as the Secretary may from time to time require, and comply with such provisions as the Secretary may from time to time find necessary to assure the correctness and verification of such reports;

(6) provide safeguards which permit the use or disclosure of information concerning applicants or recipients only (A) to public officials who require such information in connection with their official duties, or (B) to other persons for purposes directly connected with the administration of the State plan;

(7) provide, if the plan includes services to individuals in private or public institutions, for the establishment or designation of a State authority or authorities which shall be responsible for establishing and maintaining standards for such institutions;

(8) provide a description of the services which the State agency makes available under the plan including a description of the steps taken to assure, in the provision of such services, maximum utilization of other agencies providing similar or related services;

(9) provide that, in determining whether an individual is blind, there shall be an examination by a physician skilled in the diseases of the eye or by an optometrist, whichever the individual may select;



(10) include reasonable standards, consistent with the objectives of this title, for determining eligibility for and the extent of services under the plan;

(11) if the State plan includes services to individuals 65 years of age or older who are patients in institutions for mental diseases—

(A) provide for having in effect such agreements or other arrangements with State authorities concerned with mental diseases, and where appropriate, with such institutions, as may be necessary for carrying out the State plan, including arrangements for joint planning and for development of alternate methods of care, arrangements providing assurance of immediate readmittance to institutions where needed for individuals under alternate plans of care, and arrangements providing for access to patients and facilities, for furnishing information, and for making reports;

(B) provide for an individual plan for each such patient to assure that the institutional care provided to him is in his best interests, including, to that end, assurances that there will be initial and periodic review of his medical and other needs, that he will be given appropriate medical treatment within the institution, and that there will be a periodic determination of his need for continued treatment in the institution; and

(C) provide for the development of alternate plans of care, making maximum utilization of available resources, for persons receiving services under the State plan who are 65 years of age or older and who would otherwise need care in such institutions; for services referred to in section 603(a)(1)(A)(i) and (ii) which are appropriate for such persons receiving services and for such patients; and for methods of administration necessary to assure that the responsibilities of the State agency under the State plan with respect to such persons receiving services and such patients will be effectively carried out;

(12) if the State plan includes services to individuals 65 years of age or older who are patients in public institutions for mental diseases, show that the State is making satisfactory progress toward developing and implementing a comprehensive mental health program, including provision for utilization of community mental health centers, nursing homes, and other alternatives to care in public institutions for mental diseases.

Notwithstanding paragraph (3), if on October 1, 1972, the State agency which administered or supervised the administration of the plan of such State approved under title X (or so much of the plan of such State approved under title XVI as applies to the blind) was different from the State agency which administered or supervised the administration of the plan of such State approved under title I and the State agency which administered or supervised the administration of the plan of such State approved under title XIV (or so much of the plan of such State approved under title XVI as applies to the aged and disabled), the State agency which administered or supervised the administration of such plan approved under title X (or so much of the plan of such State approved under title XVI as applies to the blind) may be designated to administer or supervise the administration of the portion of the State plan for services to the aged, blind, or disabled which relates to blind individuals and a separate State agency may be established or designated to administer or supervise the administration of the rest of such plan; and in such case the part of the plan which each such agency administers, or the administration of which each such agency supervises, shall be regarded as a separate plan for purposes of this title.

(b) The Secretary shall approve any plan which fulfills the conditions specified in subsection (a), except that he shall not approve any plan which imposes, as a condition of eligibility for services under the plan—

(1) an age requirement of more than sixty-five years; or

(2) any residence requirement which excludes any individual who resides in the State; or

(3) any citizenship requirement which excludes any citizen of the United States.

#### PAYMENTS TO STATES

SEC. 603. (a) From the sums appropriated therefor, the Secretary shall, subject to section 1130, pay to each State which has a plan approved under this title, for each quarter—

(1) in the case of any State whose State plan approved under section 602 meets the requirements of subsection (c)(1), an amount equal to the sum of the following proportions of the total amounts expended during such quarter as found necessary by the Secretary of Health, Education, and Welfare for the proper and efficient administration of the State plan—

(A) 75 per centum of so much of such expenditures as are for—

(i) services which are prescribed pursuant to subsection (c)(1) and are provided (in accordance with the next sentence) to applicants for or recipients of supplementary security income benefits under title XVI to help them attain or retain capability for self-support or self-care, or

(ii) other services, specified by the Secretary as likely to prevent or reduce dependency, so provided to such applicants or recipients, or

(iii) any of the services prescribed pursuant to subsection (c)(1), and of the services specified as provided in clause (ii), which the Secretary may specify as appropriate for individuals who, within such period or periods as the Secretary may prescribe, have been or are likely to become applicants for or recipients of supplementary security income benefits under title XVI, if such services are requested by such individuals and are provided to such individuals in accordance with the next sentence, or

(iv) the training of personnel employed or preparing for employment by the State agency or by the local agency administering the plan in the political subdivision; plus

(B) one-half of so much of such expenditures (not included under subparagraph (A)) as are for services provided (in accordance with the next sentence) to applicants for or recipients of supplementary security income benefits under title XVI, and to individuals requesting such services who (within such period or periods as the Secretary may prescribe) have been or are likely to become applicants for or recipients of such benefits; plus

(C) one-half of the remainder of such expenditures.

The services referred to in subparagraphs (A) and (B) shall, except to the extent specified by the Secretary, include only—

(D) services provided by the staff of the State agency, or of the local agency administering the State plan in the political subdivisions: *Provided*, That no funds authorized under this title shall be available for services defined as vocational rehabilitation services under the Vocational Rehabilitation Act (i) which are available to individuals in need of them under programs for their rehabilitation carried on under a State plan approved under such Act, or (ii) which the State agency or agencies administering or supervising the administration of the State plan approved under such Act are able and willing to provide if reimbursed for the cost thereof pursuant to agreement under subparagraph (E), if provided by such staff, and

(E) under conditions which shall be prescribed by the Secretary, services which in the judgment of the State agency cannot be as economically or as effectively provided by the staff of such State or local agency and are not otherwise reasonably available to individuals in need of them, and which are provided, pursuant to agreement with the State agency, by the State health authority or the State agency or agencies administering or supervising the administration of the State plan for vocational rehabilitation services approved under the Vocational Rehabilitation Act or by any other State agency which the Secretary may determine to be appropriate (whether provided by its staff or by contract with public (local) or nonprofit private agencies);

except that services described in clause (ii) of subparagraph (D) hereof may be provided only pursuant to agreement with such State agency or agencies administering or supervising the administration of the State plan for vocational rehabilitation services so approved. The portion of the amount expended for administration of the State plan to which subparagraph (A) applies and the portion thereof to which subparagraphs (B) and (C) apply shall be determined in accordance with such methods and procedures as may be permitted by the Secretary; and

(2) in the case of any State whose State plan approved under section 602 does not meet the requirements of subsection (c)(1), an amount equal to one-half of the total of the sums expended during such quarter as found necessary by the Secretary for the proper and efficient administration of the State plan, including services referred to in paragraph (1) and provided in accordance with the provisions of such paragraph.

(b)(1) Prior to the beginning of each quarter, the Secretary shall estimate the amount to which a State will be entitled under subsection (a) for such quarter, such estimates to be based on (A) a report filed by the State containing its estimate of the total sum to be expended in such quarter in accordance with the provisions of such subsection, and stating the amount appropriated or made available by the State and its political subdivisions for such expenditures in such quarter, and if such amount is less than the State's proportionate share of the total sum of such estimated expenditures, the source or sources from which the difference is expected to be derived, and (B) such other investigation as the Secretary may find necessary.



(2) The Secretary shall then pay, in such installments as he may determine, to the State the amount so estimated, reduced or increased to the extent of any overpayment or underpayment which the Secretary determines was made under this section to such State for any prior quarter and with respect to which adjustment has not already been made under this subsection.

(3) Upon the making of any estimate by the Secretary under this subsection, any appropriations available for payments under this section shall be deemed obligated.

(c)(1) In order for a State to qualify for payments under paragraph (1) of subsection (a), its State plan approved under section 602 must provide that the State agency shall make available to applicants for and recipients of supplementary security income benefits under title XVI at least those services to help them attain or retain capability for self-support or self-care which are prescribed by the Secretary.

(2) In the case of any State whose State plan included a provision meeting the requirements of paragraph (1), but with respect to which the Secretary finds, after reasonable notice and opportunity for hearing to the State agency, administering or supervising the administration of such plan, that—

(A) the provision has been so changed that it no longer complies with the requirements of paragraph (1), or

(B) in the administration of the plan there is a failure to comply substantially with such provision,

the Secretary shall notify such State agency that further payments will not be made to the State under paragraph (1) of subsection (a) until he is satisfied that there will no longer be any such failure to comply. Until the Secretary is so satisfied further payments with respect to the administration of such State plan shall not be made under paragraph (1) of subsection (a) but shall instead be made, subject to the other provisions of this title, under paragraph (2) of such subsection.

(d) Notwithstanding the preceding provisions of this section, the amount determined under such provisions for any State for any quarter which is attributable to expenditures with respect to individuals 65 years of age or older who are patients in institutions for mental diseases shall be paid only to the extent that the State makes a showing satisfactory to the Secretary that total expenditures in the State from Federal, State, and local sources for mental health services (including payments to or in behalf of individuals with mental health problems) under State and local public health and public welfare programs for such quarter exceed the average of the total expenditures in the State from such sources for such services under such programs for each quarter of the fiscal year ending June 30, 1965. For purposes of this subsection, expenditures for such services for each quarter in the fiscal year ending June 30, 1965, in the case of any State shall be determined on the basis of the latest data, satisfactory to the Secretary, available to him at the time of the first determination by him under this subsection for such State; and expenditures for such services for any quarter beginning after December 31, 1965, in the case of any State shall be determined on the basis of the latest data, satisfactory to the Secretary, available to him at the time of the determination under this subsection for such State for such quarter; and determinations so made shall be conclusive for purposes of this subsection.

#### OPERATION OF STATE PLANS

SEC. 604. If the Secretary, after reasonable notice and opportunity for hearing to the State agency administering or supervising the administration of the State plan approved under this title, finds—

(1) that the plan no longer complies with the provisions of section 602; or

(2) that in the administration of the plan there is a failure to comply substantially with any such provision;

the Secretary shall notify such State agency that further payments will not be made to the State (or, in his discretion, that payments will be limited to categories under or parts of the State plan not affected by such failure), until the Secretary is satisfied that there will no longer be any such failure to comply. Until he is so satisfied he shall make no further payments to such State (or shall limit payments to categories under or parts of the State plan not affected by such failure).

#### DEFINITION

SEC. 605. For purposes of this title, the term "services to the aged, blind, or disabled" means services (including but not limited to the services referred to in section 603(a)(1)(A) and (B)) provided for or on behalf of needy individuals who are 65 years of age or older or are blind, or are disabled.



## SEC. 1106.

(c)(1)(A) Upon request (filed in accordance with paragraph (2) of this subsection) of any State or local agency participating in administration of the State plan approved under title I, X, XIV, XVI, or XIX, or part A of title IV, or participating in the administration of any other State or local public assistance program, for the most recent address of any individual included in the files of the Department of Health, Education, and Welfare maintained pursuant to section 205, the Secretary shall furnish such address, or the address of the most recent employer, or both, if such agency certifies that—

(i) an order has been issued by a court of competent jurisdiction against such individual for the support and maintenance of his child or children who are under the age of 16 in destitute or necessitous circumstances,

(ii) such child or children are applicants for or recipients of assistance available under such a plan or program,

(iii) such agency has attempted without success to secure such information from all other sources reasonably available to it, and

(iv) such information is requested (for its own use, or on the request and for the use of the court which issued the order) for the purpose of obtaining such support and maintenance.

(B) If a request for the most recent address of any individual so included is filed (in accordance with paragraph (2) of this subsection) by a court having jurisdiction to issue orders or entertain petitions against individuals for the support and maintenance of their children, the Secretary shall furnish such address, or the address of the individual's most recent employer, or both, for the use of the court (and for no other purpose) in issuing or determining whether to issue such an order against such individual or in determining (in the event such individual is not within the jurisdiction of the court) the court to which a petition for support and maintenance against such individual should be forwarded under any reciprocal arrangements with other States to obtain or improve court orders for support, if the court certifies that the information is requested for such use.

(2) A request under paragraph (1) shall be filed in such manner and form as the Secretary may prescribe (and, in the case of a request under paragraph (1)(A), shall be accompanied by a certified copy of the order referred to in clauses (i) and (iv) thereof).

(3) The penalties provided in the second sentence of subsection (a) shall apply with respect to use of information provided under paragraph (1) of this subsection except for the purpose authorized by subparagraph (A)(iv) or (B) thereof.

(4) The Secretary, in such cases and to such extent as he may prescribe in accordance with regulations, may require payment for the cost of information provided under paragraph (1); and the provisions of the second sentence of subsection (b) shall apply also with respect to payment under this paragraph.

## LIMITATION ON FUNDS FOR CERTAIN SOCIAL SERVICES

SEC. 1130. (a) Notwithstanding the provisions of section 3(a)(4) and (5), 403(a)(3), 603(a)(1), 1003(a)(3) and (4), 1403(a)(3) and (4), or 1603(a)(4) and (5), amounts payable for any fiscal year (commencing with the fiscal year beginning July 1, 1972) under such section (as determined without regard to this section) to any State with respect to expenditures made after June 30, 1972, for services referred to in such section (other than the services provided pursuant to section 402(a)(19)(G)), shall be reduced by such amounts as may be necessary to assure that—

(1) the total amount paid to such State (under all of such sections) for such fiscal year for such services does not exceed the allotment of such State (as determined under subsection (b)); and

(2) of the amounts paid under such section 403(a)(3) to such State for such fiscal year with respect to such expenditures, other than expenditures for—

(A) services provided to meet the needs of a child for personal care, protection, and supervision, but only in the case of a child where the provision of such services is needed (i) in order to enable a member of such child's family to accept or continue in employment or to participate in training to prepare such member for employment, or (ii) because of the death, continued absence from the home, or incapacity of the child's mother and the inability of any member of such child's family to provide adequate care and supervision for such child;

(B) family planning services;

(C) services provided to a mentally retarded individual (whether a child or an adult), but only if such services are needed (as determined in accordance with criteria prescribed by the Secretary) by such individual by reason of his condition of being mentally retarded;

(D) services provided to an individual who is a drug addict or an alcoholic, but only if such services are needed (as determined in accordance with criteria prescribed by the Secretary) by such individual as part of a program of active treatment of his condition as a drug addict or an alcoholic; and

(E) services provided to a child who is under foster care in a foster family home (as defined in section 408) or in a child-care institution (as defined in such section), or while awaiting placement in such a home or institution, but only if such services are needed (as determined in accordance with criteria prescribed by the Secretary) by such child because he is under foster care, not more than 10 per centum thereof are paid with respect to expenditures incurred in providing services to individuals who are not recipients of aid or assistance (under the State plan approved under part A of title IV), or applicants (as defined under regulations of the Secretary) for such aid or assistance.

(b)(1) For each fiscal year (commencing with the fiscal year beginning July 1, 1972) the Secretary shall allot to each State an amount which bears the same ratio to \$2,500,000,000 as the population of such State bears to the population of all the States.

(2) The allotment for each State shall be promulgated for each fiscal year by the Secretary between July 1 and August 31 of the calendar year immediately preceding such fiscal year on the basis of the population of each State and of all the States as determined from the most recent satisfactory data available from the Department of Commerce at such time; except that the allotment for each State for the fiscal year beginning July 1, 1972, and the following fiscal year shall be promulgated at the earliest practicable date after the enactment of this section but not later than January 1, 1973.

(c) For purposes of this section, the term "State" means any one of the fifty States or the District of Columbia.

**Provision of the Social Security Act as in Effect Prior to  
May 22, 1975 (40 Federal Register 22289)  
[Cost-of-Living]**

SEC. 215.

(a)

**TABLE FOR DETERMINING PRIMARY INSURANCE AMOUNT AND MAXIMUM FAMILY BENEFITS<sup>1</sup>**

I  (Primary insurance benefit under 1939 Act, as modified)		II  (Primary insurance amount effective for September 1972)	III  (Average monthly wage)		IV  (Primary insurance amount)	V  (Maximum family benefits)
If an individual's primary insurance benefit (as determined under subsec. (d)) is—		Or his primary insurance amount (as determined under subsec. (c)) is—	Or his average monthly wage (as determined under subsec. (b)) is—		The amount referred to in the preceding paragraphs of this subsection shall be—	And the maximum amount of benefits payable (as provided in sec. 203(a)) on the basis of his wages and self-employment income shall be—
At least—	But not more than—		At least—	But not more than—		
\$16.21	\$16.20	\$84.50		\$76	\$93.80	\$140.80
16.85	16.84	85.80	\$77	78	95.30	143.00
17.61	17.60	87.80	79	80	97.50	146.30
18.41	18.40	89.40	81	81	99.30	149.00
19.24	19.24	91.00	82	83	101.10	151.70
19.25	20.00	92.90	84	85	103.20	154.80

## SUPERSEDED PROVISIONS—SOCIAL SECURITY ACT

337 03/86

40 FR 22289

173

I (Primary insurance benefit under 1939 Act, as modified)		II (Primary insurance amount effective for September 1972)	III (Average monthly wage)		IV (Primary insurance amount)	V (Maximum family benefits)
If an individual's primary insurance benefit (as determined under subsec. (d)) is—		Or his primary insurance amount (as determined under subsec. (c)) is—	Or his average monthly wage (as determined under subsec. (b)) is—		The amount referred to in the preceding paragraphs of this subsection shall be—	And the maximum amount of benefits payable (as provided in sec. 203(a)) on the basis of his wages and self-employment income shall be—
At least—	But not more than—		At least—	But not more than—		
20.01	20.64	94.60	86	87	105.10	157.70
20.65	21.28	96.20	88	89	106.80	160.20
21.29	21.88	98.10	90	90	108.90	163.40
21.89	22.28	99.80	91	92	110.80	166.20
22.29	22.68	101.40	93	94	112.60	169.00
22.69	23.08	103.00	95	96	114.40	171.60
23.09	23.44	104.90	97	97	116.50	174.80
23.45	23.76	106.70	98	99	118.50	177.80
23.77	24.20	108.80	100	101	120.80	181.20
24.21	24.60	110.30	102	102	122.50	183.80
24.61	25.00	112.10	103	104	124.50	186.80
25.01	25.48	114.20	105	106	126.80	190.20
25.49	25.92	116.00	107	107	128.80	193.20
25.93	26.40	117.90	108	109	130.90	196.40
26.41	26.94	119.70	110	113	132.90	199.40
26.95	27.46	121.40	114	118	134.80	202.20
27.47	28.00	123.30	119	122	136.90	205.40
28.01	28.68	125.10	123	127	138.90	208.40
28.69	29.25	127.10	128	132	141.10	211.70
29.26	29.68	128.80	133	136	143.00	214.50
29.69	30.36	130.50	137	141	144.90	217.40
30.37	30.92	132.50	142	146	147.10	220.70
30.93	31.36	134.30	147	150	149.10	223.70
31.37	32.00	136.00	151	155	151.00	226.50
32.01	32.60	138.00	156	160	153.20	229.80
32.61	33.20	139.70	161	164	155.10	232.70
33.21	33.88	141.60	165	169	157.20	235.80
33.89	34.50	143.40	170	174	159.20	238.90
34.51	35.00	145.20	175	178	161.20	241.80
35.01	35.80	147.20	179	183	163.40	245.10
35.81	36.40	148.80	184	188	165.20	247.80
36.41	37.08	150.90	189	193	167.50	251.40
37.09	37.60	152.70	194	197	169.50	254.40
37.61	38.20	154.40	198	202	171.40	257.10
38.21	39.12	156.40	203	207	173.70	260.60
39.13	39.68	158.20	208	211	175.70	263.60
39.69	40.33	159.80	212	216	177.40	266.10
40.34	41.12	161.80	217	221	179.60	269.40
41.13	41.76	163.60	222	225	181.60	272.40
41.77	42.44	165.50	226	230	183.80	275.70
42.45	43.20	167.30	231	235	185.80	278.70
43.21	43.76	169.40	236	239	188.10	282.20
43.77	44.44	171.00	240	244	189.90	286.20
44.45	44.88	172.70	245	249	191.70	292.10
44.89	45.60	174.80	250	253	194.10	296.80
		176.60	254	258	196.10	302.60



## SUPERSEDED PROVISIONS—SOCIAL SECURITY ACT

174 40 FR 22289

337 03/86

I (Primary insurance benefit under 1939 Act, as modified)		II (Primary insurance amount effective for September 1972)	III (Average monthly wage)		IV (Primary insurance amount)	V (Maximum family benefits)
If an individual's primary insurance benefit (as determined under subsec. (d)) is—		Or his primary insurance amount (as determined under subsec. (c)) is—	Or his average monthly wage (as determined under subsec. (b)) is—		The amount referred to in the preceding paragraphs of this subsection shall be—	And the maximum amount of benefits payable (as provided in sec. 203(a) on the basis of his wages and self-employment income shall be—
At least—	But not more than—		At least—	But not more than—		
		178.10	259	263	197.70	308.40
		180.20	264	267	200.10	313.10
		182.00	268	272	202.10	319.00
		183.90	273	277	204.20	324.80
		185.70	278	281	206.20	329.50
		187.50	282	286	208.20	335.40
		189.50	287	291	210.40	341.30
		191.10	292	295	212.20	345.90
		193.10	296	300	214.40	351.70
		194.90	301	305	216.40	357.60
		196.60	306	309	218.30	362.40
		198.60	310	314	220.50	368.20
		200.30	315	319	222.40	374.10
		202.00	320	323	224.30	378.80
		204.00	324	328	226.50	384.70
		205.80	329	333	228.50	390.50
		207.90	334	337	230.80	395.20
		209.40	338	342	232.50	401.00
		211.20	343	347	234.50	406.90
		213.30	348	351	236.80	411.50
		215.00	352	356	238.70	417.40
		217.00	357	361	240.90	423.30
		218.70	362	365	242.80	428.00
		220.40	366	370	244.70	433.80
		222.40	371	375	246.90	439.60
		224.20	376	379	248.90	444.50
		226.20	380	384	251.10	450.30
		227.80	385	389	252.90	456.10
		229.60	390	393	254.90	460.80
		231.60	394	398	257.10	466.70
		233.30	399	403	259.00	472.60
		235.40	404	407	261.30	477.20
		236.90	408	412	263.00	483.10
		238.60	413	417	264.90	488.90
		240.30	418	421	266.80	493.60
		242.20	422	426	268.90	499.40
		243.80	427	431	270.70	505.30
		245.40	432	436	272.40	511.20
		247.40	437	440	274.70	513.50
		248.90	441	445	276.30	516.50
		250.60	446	450	278.20	519.40
		252.50	451	454	280.30	521.70
		254.10	455	459	282.10	524.60
		255.80	460	464	284.00	527.50
		257.40	465	468	285.80	530.00
		259.40	469	473	288.00	532.80

## SUPERSEDED PROVISIONS—SOCIAL SECURITY ACT

337 03/86

40 FR 22289

175

I (Primary insurance benefit under 1939 Act, as modified)		II (Primary insurance amount effective for September 1972)	III (Average monthly wage)		IV (Primary insurance amount)	V (Maximum family benefits)
If an individual's primary insurance benefit (as determined under subsec. (d)) is—		Or his primary insurance amount (as determined under subsec. (c)) is—	Or his average monthly wage (as determined under subsec. (b)) is—		The amount referred to in the preceding paragraphs of this subsection shall be—	And the maximum amount of benefits payable (as provided in sec. 203(a)) on the basis of his wages and self-employment income shall be—
At least—	But not more than—		At least—	But not more than—		
		260.90	474	478	289.60	535.80
		262.60	479	482	291.50	538.20
		264.50	483	487	293.60	541.20
		266.10	488	492	295.40	544.10
		267.80	493	496	297.30	546.40
		269.70	497	501	299.40	549.30
		271.20	502	506	301.10	552.20
		272.90	507	510	303.00	554.60
		274.60	511	515	304.90	557.50
		276.40	516	520	306.90	560.50
		278.10	521	524	308.70	562.70
		279.80	525	529	310.60	565.70
		281.70	530	534	312.70	568.60
		283.20	535	538	314.40	571.00
		284.90	539	543	316.30	573.90
		286.80	544	548	318.40	576.80
		288.40	549	553	320.20	579.80
		290.10	554	556	322.10	581.50
		291.50	557	560	323.60	583.90
		293.10	561	563	325.40	585.70
		294.60	564	567	327.10	588.00
		296.20	568	570	328.80	589.80
		297.60	571	574	330.40	592.00
		299.20	575	577	332.20	593.90
		300.60	578	581	333.70	596.10
		302.20	582	584	335.50	597.90
		303.60	585	588	337.00	600.30
		305.30	589	591	338.90	602.00
		306.80	592	595	340.60	604.40
		308.30	596	598	342.30	606.10
		309.80	599	602	343.90	608.60
		311.30	603	605	345.60	610.30
		312.80	606	609	347.30	612.50
		314.40	610	612	349.00	614.40
		315.90	613	616	350.70	616.70
		317.40	617	620	352.40	619.10
		318.90	621	623	354.00	620.80
		320.40	624	627	355.70	623.20
		321.90	628	630	357.40	625.30
		323.40	631	634	359.00	628.40
		325.00	635	637	360.80	631.30
		326.60	638	641	362.60	634.40
		328.00	642	644	364.10	637.20
		329.60	645	648	365.90	640.30
		331.00	649	652	367.50	643.10
		332.00	653	656	368.60	645.00

## SUPERSEDED PROVISIONS—SOCIAL SECURITY ACT

176

40 FR 22289

337

03/86

I (Primary insurance benefit under 1939 Act, as modified)		II (Primary insurance amount effective for September 1972)	III (Average monthly wage)		IV (Primary insurance amount)	V (Maximum family benefits)
If an individual's primary insurance benefit (as determined under subsec. (d)) is—		Or his primary insurance amount (as determined under subsec. (c)) is—	Or his average monthly wage (as determined under subsec. (b)) is—		The amount referred to in the preceding paragraphs of this subsection shall be—	And the maximum amount of benefits payable (as provided in sec. 203(a)) on the basis of his wages and self-employment income shall be—
At least—	But not more than—		At least—	But not more than—		
		332.90	657	660	369.60	646.70
		334.10	661	665	370.90	649.10
		335.30	666	670	372.20	651.40
		336.50	671	675	373.60	653.70
		337.70	676	680	374.90	656.10
		338.90	681	685	376.20	658.40
		340.10	686	690	377.60	660.70
		341.30	691	695	378.90	663.10
		342.50	696	700	380.20	665.40
		343.70	701	705	381.60	667.70
		344.90	706	710	382.90	670.00
		346.10	711	715	384.20	672.40
		347.30	716	720	385.60	674.70
		348.50	721	725	386.90	677.00
		349.70	726	730	388.20	679.40
		350.90	731	735	389.50	681.70
		352.10	736	740	390.90	684.00
		353.30	741	745	392.20	686.40
		354.50	746	750	393.50	688.70
		355.50	751	755	394.70	690.70
		356.50	756	760	395.80	692.60
		357.50	761	765	396.90	694.60
		358.50	766	770	398.00	696.50
		359.50	771	775	399.10	698.50
		360.50	776	780	400.20	700.30
		361.50	781	785	401.30	702.30
		362.50	786	790	402.40	704.20
		363.50	791	795	403.50	706.20
		364.50	796	800	404.60	708.10
		365.50	801	805	405.80	710.10
		366.50	806	810	406.90	712.00
		367.50	811	815	408.00	714.00
		368.50	816	820	409.10	715.90
		369.50	821	825	410.20	717.90
		370.50	826	830	411.30	719.80
		371.50	831	835	412.40	721.80
		372.50	836	840	413.50	723.70
		373.50	841	845	414.60	725.70
		374.50	846	850	415.70	727.50
		375.50	851	855	416.90	729.50
		376.50	856	860	418.00	731.40
		377.50	861	865	419.10	733.40
		378.50	866	870	420.20	735.30
		379.50	871	875	421.30	737.30
		380.50	876	880	422.40	739.20
		381.50	881	885	423.50	741.20



## SUPERSEDED PROVISIONS—SOCIAL SECURITY ACT

337 03/86

40 FR 22289

177

I (Primary insurance benefit under 1939 Act, as modified)		II (Primary insurance amount effective for September 1972)	III (Average monthly wage)		IV (Primary insurance amount)	V (Maximum family benefits)
If an individual's primary insurance benefit (as determined under subsec. (d)) is—		Or his primary insurance amount (as determined under subsec. (c)) is—	Or his average monthly wage (as determined under subsec. (b)) is—		The amount referred to in the preceding paragraphs of this subsection shall be—	And the maximum amount of benefits payable (as provided in sec. 203(a)) on the basis of his wages and self-employment income shall be—
At least—	But not more than—		At least—	But not more than—		
		382.50	886	890	424.60	743.10
		383.50	891	895	425.70	745.10
		384.50	896	900	426.80	747.00
		385.50	901	905	428.00	749.00
		386.50	906	910	429.10	750.90
		387.50	911	915	430.20	752.90
		388.50	916	920	431.30	754.70
		389.50	921	925	432.40	756.70
		390.50	926	930	433.50	758.60
		391.50	931	935	434.60	760.60
		392.50	936	940	435.70	762.50
		393.50	941	945	436.80	764.50
		394.50	946	950	437.90	766.40
		395.50	951	955	439.10	768.40
		396.50	956	960	440.20	770.30
		397.50	961	965	441.30	772.30
		398.50	966	970	442.40	774.20
		399.50	971	975	443.50	776.20
		400.50	976	980	444.60	778.00
		401.50	981	985	445.70	780.00
		402.50	986	990	446.80	781.90
		403.50	991	995	447.90	783.90
		404.50	996	1,000	449.00	785.80
			1,001	1,005	450.00	787.50
			1,006	1,010	451.00	789.30
			1,011	1,015	452.00	791.00
			1,016	1,020	453.00	792.80
			1,021	1,025	454.00	794.50
			1,026	1,030	455.00	796.30
			1,031	1,035	456.00	798.00
			1,036	1,040	457.00	799.80
			1,041	1,045	458.00	801.50
			1,046	1,050	459.00	803.30
			1,051	1,055	460.00	805.00
			1,056	1,060	461.00	806.80
			1,061	1,065	462.00	808.50
			1,066	1,070	463.00	810.30
			1,071	1,075	464.00	812.00
			1,076	1,080	465.00	813.80
			1,081	1,085	466.00	815.50
			1,086	1,090	467.00	817.30
			1,091	1,095	468.00	819.00
			1,096	1,100	469.00	820.80

<sup>1</sup>Enacted by P.L. 93-233, §2(a), applicable to monthly benefits for months after May 1974, and lump-sum death payments under section 202(i) in the case of deaths occurring after May 1974. For the table effective beginning June 1975, see p. 181.

---

**Provision of the Social Security Act as in Effect Prior to  
P.L. 94-44, Approved June 28, 1975 (89 Stat. 235)  
[Social Security—Temporary Assistance]**

SEC. 1113.

(d) No temporary assistance may be provided under this section after June 30, 1973.

---

**Provisions of the Social Security Act as in Effect Prior to  
P.L. 94-88, Approved August 9, 1975 (89 Stat. 433)  
[Tariffs—Social Security]**

SEC. 402. (a)

(9) provide safeguards which permit the use or disclosure of information concerning applicants or recipients only to (A) public officials who require such information in connection with their official duties, or (B) other persons for purposes directly connected with the administration of aid to families with dependent children;

**PAYMENTS TO STATES**

SEC. 455. From the sums appropriated therefor, the Secretary shall pay to each State for each quarter, beginning with the quarter commencing July 1, 1975, an amount equal to 75 percent of the total amounts expended by such State during such quarter for the operation of the plan approved under section 454 except that no amount shall be paid to any State on account of furnishing collection services (other than parent locator services) to individuals under section 454(6) during any period beginning after June 30, 1976.

---

**Provisions of the Social Security Act as in Effect Prior to  
P.L. 94-182, Approved December 31, 1975 (89 Stat. 1051)  
[Social Security—Medicare]**

SEC. 1862.

(c) No payment may be made under this title with respect to any item or service furnished to or on behalf of any individual on or after January 1, 1976, if such item or service is covered under a health benefits plan in which such individual is enrolled under chapter 89 of title 5, United States Code, unless prior to the date on which such item or service is so furnished the Secretary shall have determined and certified that such plan or the Federal employees health benefits program under chapter 89 of such title 5 has been modified so as to assure that—

(1) there is available to each Federal employee or annuitant enrolled in such plan, upon becoming entitled to benefits under part A or B, or both parts A and B of this title, in addition to the health benefits plans available before he becomes so entitled, one or more health benefits plans which offer protection supplementing the protection he has under this title, and

(2) the Government or such plan will make available to such Federal employee or annuitant a contribution in an amount at least equal to the contribution which the Government makes toward the health insurance of any employee or annuitant enrolled for high option coverage under the Government-wide plans established under chapter 89 of such title 5, with such contribution being in the form of (A) a contribution toward the supplementary protection referred to in paragraph (1), (B) a payment to or on behalf of such employee or annuitant to offset the cost to him of his coverage under this title, or (C) a combination of such contribution and such payment.

SEC. 1903.

(g)(1)

(C) such State has in effect a continuous program of review of utilization pursuant to section 1902(a)(30) whereby the necessity for admission and the continued stay of each patient in such institution is periodically reviewed and evaluated (with such frequency as may be prescribed in regulations of the Secretary) by medical and other professional personnel who are not themselves directly responsible for the care of the patient or financially interested in any such institution or, except in the case of hospitals, employed by the institution; and

**Provisions of the Social Security Act as in Effect Prior to  
P.L. 94-202, Approved January 2, 1976 (89 Stat. 1135)  
[Social Security—Hearings and Review Procedures]**

SEC. 201.

(g)(1)(A) There are authorized to be made available for expenditure, out of any or all of the Trust Funds (which for purposes of this paragraph shall include also the Federal Hospital Insurance Trust Fund and the Federal Supplementary Medical Insurance Trust Fund established by title XVIII), such amounts as the Congress may deem appropriate to pay the costs of the part of the administration of this title, title XVI, and title XVIII for which the Secretary of Health, Education, and Welfare is responsible. During each fiscal year or after the close of such fiscal year (or at both times), the Secretary of Health, Education, and Welfare shall analyze the costs of administration of this title, title XVI, and title XVIII during the appropriate part or all of such fiscal year in order to determine the portion of such costs which should be borne by each of the Trust Funds and (with respect to title XVI) by the general revenues of the United States and shall certify to the Managing Trustee the amount, if any, which should be transferred among such Trust Funds in order to assure that (after appropriations made pursuant to section 1601, and repayment to the Trust Funds from amounts so appropriated) each of the Trust Funds and the general revenues of the United States bears its proper share of the costs incurred during such fiscal year for the part of the administration of this title, title XVI, and title XVIII for which the Secretary of Health, Education, and Welfare is responsible. The Managing Trustee is authorized and directed to transfer any such amount (determined under the preceding sentence) among such Trust Funds in accordance with any certification so made.

(B) The Managing Trustee is directed to pay from the Trust Funds into the Treasury the amounts estimated by him which will be expended, out of moneys appropriated from the general funds in the Treasury, during each calendar quarter by the Treasury Department for the part of the administration of this title and title XVIII for which the Treasury Department is responsible and for the administration of chapters 2 and 21 of the Internal Revenue Code of 1954. Such payments shall be covered into the Treasury as repayment to the account for reimbursement of expenses incurred in connection with such administration of this title and title XVIII and chapters 2 and 21 of the Internal Revenue Code of 1954.

SEC. 230.

(b)

(2) the ratio of (A) the average of the taxable wages of all employees as reported to the Secretary for the first calendar quarter of the calendar year in which the determination under subsection (a) with respect to such particular calendar year was made to the latest of (B) the average of the taxable wages of all employees as reported to the Secretary for the first calendar quarter of 1973 or the first calendar quarter of the most recent calendar year in which an increase in the contribution and benefit base was enacted or a determination resulting in such an increase was made under subsection (a),

SEC. 1631.

**Hearings and Review**

(c)(1) The Secretary shall provide reasonable notice and opportunity for a hearing to any individual who is or claims to be an eligible individual or eligible spouse and is in disagreement with any determination under this title with respect to eligibility of such individual for benefits, or the amount of such individual's benefits, if such individual requests a hearing on the matter in disagreement within thirty days after notice of such determination is received.



(2) Determination on the basis of such hearing, except to the extent that the matter in disagreement involves the existence of a disability (within the meaning of section 1614(a)(3)), shall be made within ninety days after the individual requests the hearing as provided in paragraph (1).

(3) The final determination of the Secretary after a hearing under paragraph (1) shall be subject to judicial review as provided in section 205(g) to the same extent as the Secretary's final determinations under section 205; except that the determination of the Secretary after such hearing as to any fact shall be final and conclusive and not subject to review by any court.

(d)

(2) To the extent the Secretary finds it will promote the achievement of the objectives of this title, qualified persons may be appointed to serve as hearing examiners in hearings under subsection (c) without meeting the specific standards prescribed for hearing examiners by or under subchapter II of chapter 5 of title 5, United States Code.

---

**Provisions of the Social Security Act as in Effect Prior to  
P.L. 94-273, Approved April 21, 1976 (90 Stat. 375)  
Fiscal Year Adjustment Act**

**SEC. 217.**

(g)(1) In September 1965, and in every fifth September thereafter up to and including September 2010, the Secretary shall determine the amount which, if paid in equal installments at the beginning of each fiscal year in the period beginning—

(A) with July 1, 1965, in the case of the first such determination, and

(B) with the July 1 following the determination in the case of all other such determinations, and ending with the close of June 30, 2015, would accumulate, with interest compounded annually, to an amount equal to the amount needed to place each of the Trust Funds and the Federal Hospital Insurance Trust Fund in the same position at the close of June 30, 2015, as he estimates they would otherwise be in at the close of that date if section 210 of this Act as in effect prior to the Social Security Act Amendments of 1950, and this section, had not been enacted. The rate of interest to be used in determining such amount shall be the rate determined under section 201(d) for public-debt obligations which were or could have been issued for purchase by the Trust Funds in the June preceding the September in which such determination is made.

**SEC. 903.**

(c)

(2)

(D) the appropriation law limits the total amount which may be obligated during a fiscal year to an amount which does not exceed the amount by which (i) the aggregate of the amounts transferred to the account of such State pursuant to subsections (a) and (b) during such fiscal year and the twenty-four preceding fiscal years, exceeds (ii) the aggregate of the amounts used by the State pursuant to this subsection and charged against the amounts transferred to the account of such State during such twenty-five fiscal years.

For the purposes of subparagraph (D), amounts used by a State during any fiscal year shall be charged against equivalent amounts which were first transferred and which have not previously been so charged; except that no amount obligated for administration during any fiscal year may be charged against any amount transferred during a fiscal year earlier than the twenty-fourth preceding fiscal year.

**Provision of the Social Security Act as in Effect Prior to  
May 14, 1976 (41 Federal Register 19999)  
[Cost-of-Living Increase]**

SEC. 215.  
(a)

**TABLE FOR DETERMINING PRIMARY INSURANCE AMOUNT AND MAXIMUM FAMILY  
BENEFITS BEGINNING JUNE 1975<sup>1</sup>**

I (Primary insurance benefit under 1939 Act, as modified)		II (Primary insurance amount ef- fective for June 1974)	III (Average monthly wage)		IV (Primary insurance amount)	V (Maximum family ben- efits)
If an individual's primary insurance benefit (as deter- mined under subsec. (d)) is—		Or his pri- mary insur- ance amount (as determined under sub- sec. (c)) is—	Or his average monthly wage (as de- termined under sub- sec. (b)) is—		The amount referred to in the pre- ceding para- graphs of this sub- section shall be—	And the maximum amount of benefits payable (as provided in sec. 203(a)) on the basis of his wages and self- employ- ment in- come shall be—
At least—	But not more than—		At least—	But not more than—		
\$16.21	\$16.20	\$93.80		\$76	\$101.40	\$152.10
16.85	16.84	95.30	\$77	78	103.00	154.50
17.61	17.60	97.50	79	80	105.30	158.10
18.41	18.40	99.30	81	81	107.30	161.00
19.25	19.24	101.10	82	83	109.20	163.90
20.01	20.00	103.20	84	85	111.50	167.30
20.65	20.64	105.10	86	87	113.60	170.40
21.29	21.28	106.80	88	89	115.40	173.10
21.89	21.88	108.90	90	90	117.70	176.60
22.29	22.28	110.80	91	92	119.70	179.60
22.69	22.68	112.60	93	94	121.70	182.60
23.09	23.08	114.40	95	96	123.60	185.40
23.45	23.44	116.50	97	97	125.90	188.90
23.77	23.76	118.50	98	99	128.00	192.10
24.21	24.20	120.80	100	101	130.50	195.80
24.61	24.60	122.50	102	102	132.30	198.60
25.01	25.00	124.50	103	104	134.50	201.80
25.49	25.48	126.80	105	106	137.00	205.50
25.93	25.92	128.80	107	107	139.20	208.80
26.41	26.40	130.90	108	109	141.40	212.20
26.95	26.94	132.90	110	113	143.60	215.40
27.47	27.46	134.80	114	118	145.60	218.40
28.01	28.00	136.90	119	122	147.90	221.90
28.69	28.68	138.90	123	127	150.10	225.20
29.26	29.25	141.10	128	132	152.40	228.70
29.69	29.68	143.00	133	136	154.50	231.80
30.37	30.36	144.90	137	141	156.50	234.80
30.93	30.92	147.10	142	146	158.90	238.40
31.37	31.36	149.10	147	150	161.10	241.70
32.01	32.00	151.00	151	155	163.10	244.70
32.61	32.60	153.20	156	160	165.50	248.30
33.21	33.20	155.10	161	164	167.60	251.40
33.89	33.88	157.20	165	169	169.80	254.70
34.51	34.50	159.20	170	174	172.00	258.10
	35.00	161.20	175	178	174.10	261.20

**SUPERSEDED PROVISIONS—SOCIAL SECURITY ACT**

182 41 FR 19999

337 03/86

I (Primary insurance benefit under 1939 Act, as modified)		II (Primary insurance amount ef- fective for June 1974)	III (Average monthly wage)		IV (Primary insurance amount)	V (Maximum family ben- efits)
If an individual's primary insurance benefit (as deter- mined under subsec. (d)) is—		Or his pri- mary insur- ance amount (as determined under subsec. (c)) is—	Or his average monthly wage (as de- termined under sub- sec. (b)) is—		The amount referred to in the pre- ceding para- graphs of this sub- section shall be—	And the maximum amount of benefits payable (as provided in sec. 203(a)) on the basis of his wages and self- employ- ment in- come shall be—
At least—	But not more than—		At least—	But not more than—		
35.01	35.80	163.40	179	183	176.50	264.80
35.81	36.40	165.20	184	188	178.50	267.80
36.41	37.08	167.50	189	193	180.90	271.60
37.09	37.60	169.50	194	197	183.10	274.80
37.61	38.20	171.40	198	202	185.20	277.80
38.21	39.12	173.70	203	207	187.60	281.50
39.13	39.68	175.70	208	211	189.80	284.70
39.69	40.33	177.40	212	216	191.60	287.40
40.34	41.12	179.60	217	221	194.00	291.00
41.13	41.76	181.60	222	225	196.20	294.30
41.77	42.44	183.80	226	230	198.60	297.90
42.45	43.20	185.80	231	235	200.70	301.10
43.21	43.76	188.10	236	239	203.20	304.80
43.77	44.44	189.90	240	244	205.10	309.10
44.45	44.88	191.70	245	249	207.10	315.50
44.89	45.60	194.10	250	253	209.70	320.60
		196.10	254	258	211.80	326.90
		197.70	259	263	213.60	333.10
		200.10	264	267	216.20	338.20
		202.10	268	272	218.30	344.60
		204.20	273	277	220.60	350.80
		206.20	278	281	222.70	355.90
		208.20	282	286	224.90	362.30
		210.40	287	291	227.30	368.70
		212.20	292	295	229.20	373.60
		214.40	296	300	231.60	379.90
		216.40	301	305	233.80	386.30
		218.30	306	309	235.80	391.40
		220.50	310	314	238.20	397.70
		222.40	315	319	240.20	404.10
		224.30	320	323	242.30	409.20
		226.50	324	328	244.70	415.50
		228.50	329	333	246.80	421.80
		230.80	334	337	249.30	426.90
		232.50	338	342	251.10	433.10
		234.50	343	347	253.30	439.50
		236.80	348	351	255.80	444.50
		238.70	352	356	257.80	450.80
		240.90	357	361	260.20	457.20
		242.80	362	365	262.30	462.30
		244.70	366	370	264.30	468.60
		246.90	371	375	266.70	474.80
		248.90	376	379	268.90	480.10
		251.10	380	384	271.20	486.40
		252.90	385	389	273.20	492.60
		254.90	390	393	275.30	497.70
		257.10	394	398	277.70	504.10



## SUPERSEDED PROVISIONS—SOCIAL SECURITY ACT

337 03/86

41 FR 19999

183

I (Primary insurance benefit under 1939 Act, as modified)		II (Primary insurance amount ef- fective for June 1974)	III (Average monthly wage)		IV (Primary insurance amount)	V (Maximum family ben- efits)
If an individual's primary insurance benefit (as deter- mined under subsec. (d)) is—		Or his pri- mary insur- ance amount (as determined under sub- sec. (c)) is—	Or his average monthly wage (as de- termined under sub- sec. (b)) is—		The amount referred to in the pre- ceding para- graphs of this sub- section shall be—	And the maximum amount of benefits payable (as provided in sec. 203(a)) on the basis of his wages and self- employ- ment in- come shall be—
At least—	But not more than—		At least—	But not more than—		
		259.00	399	403	279.80	510.50
		261.30	404	407	282.30	515.40
		263.00	408	412	284.10	521.80
		264.90	413	417	286.10	528.10
		266.80	418	421	288.20	533.10
		268.90	422	426	290.50	539.40
		270.70	427	431	292.40	545.80
		272.40	432	436	294.20	552.10
		274.70	437	440	296.70	554.60
		276.30	441	445	298.50	557.90
		278.20	446	450	300.50	561.00
		280.30	451	454	302.80	563.50
		282.10	455	459	304.70	566.60
		284.00	460	464	306.80	569.70
		285.80	465	468	308.70	572.40
		288.00	469	473	311.10	575.50
		289.60	474	478	312.80	578.70
		291.50	479	482	314.90	581.30
		293.60	483	487	317.10	584.50
		295.40	488	492	319.10	587.70
		297.30	493	496	321.10	590.20
		299.40	497	501	323.40	593.30
		301.10	502	506	325.20	596.40
		303.00	507	510	327.30	599.00
		304.90	511	515	329.30	602.10
		306.90	516	520	331.50	605.40
		308.70	521	524	333.40	607.80
		310.60	525	529	335.50	611.00
		312.70	530	534	337.80	614.10
		314.40	535	538	339.60	616.70
		316.30	539	543	341.70	619.90
		318.40	544	548	343.90	623.00
		320.20	549	553	345.90	626.20
		322.10	554	556	347.90	628.10
		323.60	557	560	349.50	630.70
		325.40	561	563	351.50	632.60
		327.10	564	567	353.30	635.10
		328.80	568	570	355.20	637.00
		330.40	571	574	356.90	639.40
		332.20	575	577	358.80	641.50
		333.70	578	581	360.40	643.80
		335.50	582	584	362.40	645.80
		337.00	585	588	364.00	648.40
		338.90	589	591	366.10	650.20
		340.60	592	595	367.90	652.80
		342.30	596	598	369.70	654.60
		343.90	599	602	371.50	657.30

## SUPERSEDED PROVISIONS—SOCIAL SECURITY ACT

184 41 FR 19999

337 03/86

I (Primary insurance benefit under 1939 Act, as modified)		II (Primary insurance amount effective for June 1974)	III (Average monthly wage)		IV (Primary insurance amount)	V (Maximum family benefits)
If an individual's primary insurance benefit (as determined under subsec. (d)) is—		Or his primary insurance amount (as determined under subsec. (c)) is—	Or his average monthly wage (as determined under subsec. (b)) is—		The amount referred to in the preceding paragraphs of this subsection shall be—	And the maximum amount of benefits payable (as provided in sec. 203(a)) on the basis of his wages and self-employment income shall be—
At least—	But not more than—		At least—	But not more than—		
		345.60	603	605	373.30	659.20
		347.30	606	609	375.10	661.50
		349.00	610	612	377.00	663.60
		350.70	613	616	378.80	666.10
		352.40	617	620	380.60	668.70
		354.00	621	623	382.40	670.50
		355.70	624	627	384.20	673.10
		357.40	628	630	386.00	675.40
		359.00	631	634	387.80	678.70
		360.80	635	637	389.70	681.90
		362.60	638	641	391.70	685.20
		364.10	642	644	393.30	688.20
		365.90	645	648	395.20	691.60
		367.50	649	652	396.90	694.60
		368.60	653	656	398.10	696.60
		369.60	657	660	399.20	698.50
		370.90	661	665	400.60	701.10
		372.20	666	670	402.00	703.60
		373.60	671	675	403.50	706.00
		374.90	676	680	404.90	708.60
		376.20	681	685	406.30	711.10
		377.60	686	690	407.90	713.60
		378.90	691	695	409.30	716.20
		380.20	696	700	410.70	718.70
		381.60	701	705	412.20	721.20
		382.90	706	710	413.60	723.60
		384.20	711	715	415.00	726.20
		385.60	716	720	416.50	728.70
		386.90	721	725	417.90	731.20
		388.20	726	730	419.30	733.80
		389.50	731	735	420.70	736.30
		390.90	736	740	422.20	738.80
		392.20	741	745	423.60	741.40
		393.50	746	750	425.00	743.80
		394.70	751	755	426.30	746.00
		395.80	756	760	427.50	748.10
		396.90	761	765	428.70	750.20
		398.00	766	770	429.90	752.30
		399.10	771	775	431.10	754.40
		400.20	776	780	432.30	756.40
		401.30	781	785	433.50	758.50
		402.40	786	790	434.60	760.60
		403.50	791	795	435.80	762.70
		404.60	796	800	437.00	764.80
		405.80	801	805	438.30	767.00
		406.90	806	810	439.50	769.00
		408.00	811	815	440.70	771.20

## SUPERSEDED PROVISIONS—SOCIAL SECURITY ACT

337 03/86

41 FR 19999

185

I (Primary insurance benefit under 1939 Act, as modified)		II (Primary insurance amount effective for June 1974)	III (Average monthly wage)		IV (Primary insurance amount)	V (Maximum family benefits)
If an individual's primary insurance benefit (as determined under subsec. (d)) is—		Or his primary insurance amount (as determined under subsec. (c)) is—	Or his average monthly wage (as determined under subsec. (b)) is—		The amount referred to in the preceding paragraphs of this subsection shall be—	And the maximum amount of benefits payable (as provided in sec. 203(a)) on the basis of his wages and self-employment income shall be—
At least—	But not more than—		At least—	But not more than—		
		409.10	816	820	441.90	773.20
		410.20	821	825	443.10	775.40
		411.30	826	830	444.30	777.40
		412.40	831	835	445.40	779.60
		413.50	836	840	446.60	781.60
		414.60	841	845	447.80	783.80
		415.70	846	850	449.00	785.70
		416.90	851	855	450.30	787.90
		418.00	856	860	451.50	790.00
		419.10	861	865	452.70	792.10
		420.20	866	870	453.90	794.20
		421.30	871	875	455.10	796.30
		422.40	876	880	456.20	798.40
		423.50	881	885	457.40	800.50
		424.60	886	890	458.60	802.60
		425.70	891	895	459.80	804.80
		426.80	896	900	461.00	806.80
		428.00	901	905	462.30	809.00
		429.10	906	910	463.50	811.00
		430.20	911	915	464.70	813.20
		431.30	916	920	465.90	815.10
		432.40	921	925	467.00	817.30
		433.50	926	930	468.20	819.30
		434.60	931	935	469.40	821.50
		435.70	936	940	470.60	823.50
		436.80	941	945	471.80	825.70
		437.90	946	950	473.00	827.80
		439.10	951	955	474.30	829.90
		440.20	956	960	475.50	832.00
		441.30	961	965	476.70	834.10
		442.40	966	970	477.80	836.20
		443.50	971	975	479.00	838.30
		444.60	976	980	480.20	840.30
		445.70	981	985	481.40	842.40
		446.80	986	990	482.60	844.50
		447.90	991	995	483.80	846.70
		449.00	996	1000	485.00	848.70
		450.00	1001	1005	486.00	850.50
		451.00	1006	1010	487.10	852.50
		452.00	1011	1015	488.20	854.30
		453.00	1016	1020	489.30	856.30
		454.00	1021	1025	490.40	858.10
		455.00	1026	1030	491.40	860.10
		456.00	1031	1035	492.50	861.90
		457.00	1036	1040	493.60	863.80
		458.00	1041	1045	494.70	865.70
		459.00	1046	1050	495.80	867.60



I (Primary insurance benefit under 1939 Act, as modified)		II (Primary insurance amount ef- fective for June 1974)	III (Average monthly wage)		IV (Primary insurance amount)	V (Maximum family ben- efits)
If an individual's primary insurance benefit (as deter- mined under subsec. (d)) is—		Or his pri- mary insur- ance amount (as determined under sub- sec. (c)) is—	Or his average monthly wage (as de- termined under sub- sec. (b)) is—		The amount referred to in the pre- ceding para- graphs of this sub- section shall be—	And the maximum amount of benefits payable (as provided in sec. 203(a)) on the basis of his wages and self- employ- ment in- come shall be—
At least—	But not more than—		At least—	But not more than—		
		460.00	1051	1055	496.80	869.40
		461.00	1056	1060	497.90	871.40
		462.00	1061	1065	499.00	873.20
		463.00	1066	1070	500.10	875.20
		464.00	1071	1075	501.20	877.00
		465.00	1076	1080	502.20	879.00
		466.00	1081	1085	503.30	880.80
		467.00	1086	1090	504.40	882.70
		468.00	1091	1095	505.50	884.60
		469.00	1096	1100	506.60	886.50
		470.00	1101	1105	507.60	888.30
		471.00	1106	1110	508.70	890.30
		472.00	1111	1115	509.80	892.10
		473.00	1116	1120	510.90	894.10
		474.00	1121	1125	512.00	895.90
		475.00	1126	1130	513.00	897.90
		476.00	1131	1135	514.10	899.70
		477.00	1136	1140	515.20	901.60
		478.00	1141	1145	516.30	903.50
		479.00	1146	1150	517.40	905.40
		480.00	1151	1155	518.40	907.20
		481.00	1156	1160	519.50	909.20
		482.00	1161	1165	520.60	911.00
		483.00	1166	1170	521.70	913.00
		484.00	1171	1175	522.80	914.80

<sup>1</sup>This revised table of benefits was published in the Federal Register on May 22, 1975 (40 FR 22289), as required by P.L. 93-66, §203, as follows:

"(f) Effective June 1, 1974, the Secretary of Health, Education, and Welfare, shall prescribe and publish in the Federal Register such modifications and extensions in the table contained in section 215(a) of the Social Security Act (which shall be determined in the same manner as the revisions in such table provided for under section 215(i)(2)(D) of such Act) as may be necessary to reflect the amendments made by this section; and such modified and extended table shall be deemed to be the table appearing in such section 215(a)."

This table was effective through May 1976. For the table effective beginning June 1976, see p. 189.

**Provision of the Social Security Act as in Effect Prior to  
P.L. 94-365, Approved July 14, 1976 (90 Stat. 990)  
[Social Security—Report to Congress]**

SEC. 1631.

(g)

(6) The provisions of this subsection shall expire on June 30, 1976. At least sixty days prior to such expiration date, the Secretary shall submit to Congress a report assessing the effects of actions taken pursuant to this subsection, including the adequacy of

interim assistance provided and the efficiency and effectiveness of the administration of such provisions. Such report may include such recommendations as the Secretary deems appropriate.

---

**Provisions of the Social Security Act as in Effect Prior to  
P.L. 94-460, Approved October 8, 1976 (90 Stat. 1945)  
Health Maintenance Organization Amendments of 1976**

**SEC. 1876.**

(b) The term "health maintenance organization" means a public or private organization which—

(1) provides, either directly or through arrangements with others, health services to individuals enrolled with such organization on the basis of a predetermined periodic rate without regard to the frequency or extent of services furnished to any particular enrollee;

(2) provides, either directly or through arrangements with others, to the extent applicable in subsection (c) (through institutions, entities, and persons meeting the applicable requirements of section 1861), all of the services and benefits covered under parts A and B of this title which are available to individuals residing in the geographic area served by the health maintenance organization;

(3) provides physicians' services primarily (A) directly through physicians who are either employees or partners of such organization, or (B) under arrangements with one or more groups of physicians (organized on a group practice or individual practice basis) under which each such group is reimbursed for its services primarily on the basis of an aggregate fixed sum or on a per capita basis, regardless of whether the individual physician members of any such group are paid on a fee-for-service or other basis;

(4) provides either directly or under arrangements with others, the services of a sufficient number of primary care and specialty care physicians to meet the health needs of its members; for purposes of this section the term "specialty care physician" means a physician who is either board certified or eligible for board certification, except that the Secretary may by regulation prescribe conditions under which physicians who have a record of demonstrated proficiency but who are not eligible for board certification may, on the basis of training and experience, be recognized as specialty care physicians;

(5) has effective arrangements to assure that its members have access to qualified practitioners in those specialties which are generally available in the geographic area served by the health maintenance organization;

(6) demonstrates to the satisfaction of the Secretary proof of financial responsibility and proof of capability to provide comprehensive health care services, including institutional services, efficiently, effectively, and economically;

(7) except as provided in subsection (h), has at least half of its enrolled members consisting of individuals under age 65;

(8) assures that the health services required by its members are received promptly and appropriately and that the services that are received measure up to quality standards which it establishes in accordance with regulations; and

(9) has an open enrollment period at least every year under which it accepts up to the limits of its capacity and without restrictions, except as may be authorized in regulations, individuals who are eligible to enroll under subsection (d) in the order in which they apply for enrollment (unless to do so would result in failure to meet the requirements of paragraph (7)) or would result in enrollment of enrollees substantially nonrepresentative, as determined in accordance with regulations of the Secretary, of the population in the geographic area served by such health maintenance organization.

(h) The provisions of paragraph (7) of subsection (b) shall not apply with respect to any health maintenance organization for such period not to exceed three years from the date such organization enters into an agreement with the Secretary pursuant to subsection (i), as the Secretary may permit, but only so long as such organization demonstrates to the satisfaction of the Secretary by the submission of its plans for each year that it is making continuous efforts and progress toward achieving compliance with the provisions of such paragraph (7) within such three-year period.

**Provisions of the Social Security Act as in Effect Prior to  
P.L. 94-552, Approved October 18, 1976 (90 Stat. 2540)  
[Social Security—Medical Assistance]**

**SEC. 1902.**

(g) Notwithstanding any other provision of this title, a State plan for medical assistance must include a consent by the State to the exercise of the judicial power of the United States in any suit brought against the State or a State officer by or on behalf of any provider of services (as defined in section 1861(u)) with respect to the application of subsection (a)(13)(D) to services furnished under such plan after June 30, 1975, and a waiver by the State of any immunity from such a suit conferred by the 11th amendment to the Constitution or otherwise.

**SEC. 1903.**

(l) Notwithstanding any other provision of this section, the amount payable to any State under this section with respect to any quarter beginning after December 31, 1975, shall be reduced by 10 per centum of the amount determined with respect to such quarter under the preceding provisions of this section if such State is found by the Secretary not to be in compliance with section 1902(g).

**Provisions of the Social Security Act as Effect Prior to  
P. L. 94-566, Approved October 20, 1976 (90 Stat. 2667)  
Unemployment Compensation Amendments of 1976**

**SEC. 407.**

(b)

(2)

(C) for the denial of aid to families with dependent children to any child or relative specified in subsection (a)—

(i) if, and for so long as, such child's father is not currently registered with the public employment offices in the State, and

(ii) with respect to any week for which such child's father receives unemployment compensation under an unemployment compensation law of a State or of the United States.

**SEC. 901.**

(c)

(3)

(C) Each estimate of net receipts under this paragraph shall be based upon a tax rate of 0.5 percent.

**SEC. 1611.**

(e)(1)

(B)

(ii) at a rate not in excess of the sum of the applicable rate specified in subsection (b)(1) and the rate of \$300 per year (reduced by the amount of any income not excluded pursuant to section 1612(b)) in the case of an individual who has an eligible spouse, if only one of them is in such a hospital, home, or facility throughout such month; and

**REHABILITATION SERVICES FOR BLIND AND DISABLED INDIVIDUALS**

**SEC. 1615. (a) In the case of any blind or disabled individual who—**

(1) has not attained age 65, and

(2) is receiving benefits (or with respect to whom benefits are paid) under this title,

the Secretary shall make provision for referral of such individual to the appropriate State agency administering the State plan for vocational rehabilitation services approved under the Vocational Rehabilitation Act, and (except in such cases as he may determine) for a review not less often than quarterly of such individual's blindness or disability and his need for and utilization of the rehabilitation services made available to him under such plan.

(b) Every individual with respect to whom the Secretary is required to make provision for referral under subsection (a) shall accept such rehabilitation services as are made available to him under the State plan for vocational rehabilitation services



**SUPERSEDED PROVISIONS—SOCIAL SECURITY ACT**

337 03/86

42 FR 24210 189

approved under the Vocational Rehabilitation Act; and the Secretary is authorized to pay to the State agency administering or supervising the administration of such State plan the costs incurred in the provision of such services to individuals so referred.

(c) No individual shall be an eligible individual or eligible spouse for purposes of this title if he refuses without good cause to accept vocational rehabilitation services for which he is referred under subsection (a).

**SEC. 1616.**

(e) Payments made under this title with respect to an individual shall be reduced by an amount equal to the amount of any supplementary payment (as described in subsection (a)) or other payment made by a State (or political subdivision thereof) which is made for or on account of any medical or any other type of remedial care provided by an institution to such individual as an inpatient of such institution in the case of any State which has a plan approved under title XIX of this Act if such care is (or could be) provided under a State plan approved under title XIX of this Act by an institution certified under such title XIX.

**Provision Deemed to be in Social Security Act, as in Effect Prior to  
May 12, 1977 (42 Federal Register 24210)  
[Cost-of-Living Increase]**

**SEC. 215.**

(a)

**TABLE FOR DETERMINING PRIMARY INSURANCE AMOUNT AND MAXIMUM FAMILY BENEFITS BEGINNING JUNE 1976<sup>1</sup>**

I (Primary insurance benefit under 1939 Act, as modified)		II (Primary insurance amount effective for June 1975)	III (Average monthly wage)		IV (Primary insurance amount)	V (Maximum family benefits)
If an individual's primary insurance benefit (as determined under subsec. (d)) is—		Or his primary insurance amount (as determined under subsec. (c)) is—	Or his average monthly wage (as determined under subsec. (b)) is—		The amount referred to in the preceding paragraphs of this subsection shall be—	And the maximum amount of benefits payable (as provided in sec. 203(a)) on the basis of his wages and self-employment income shall be—
At least—	But not more than—		At least—	But not more than—		
	\$16.20	\$101.40		\$76	\$107.90	\$161.90
\$16.21	16.84	103.00	\$77	78	109.60	164.40
16.85	17.60	105.30	79	80	112.10	168.30
17.61	18.40	107.30	81	81	114.20	171.40
18.41	19.24	109.20	82	83	116.20	174.40
19.25	20.00	111.50	84	85	118.70	178.10
20.01	20.64	113.60	86	87	120.90	181.40
20.65	21.28	115.40	88	89	122.80	184.20
21.29	21.88	117.70	90	90	125.30	188.00
21.89	22.28	119.70	91	92	127.40	191.10
22.29	22.68	121.70	93	94	129.50	194.30
22.69	23.08	123.60	95	96	131.60	197.40
23.09	23.44	125.90	97	97	134.00	201.00
23.45	23.76	128.00	98	99	136.20	204.40
23.77	24.20	130.50	100	101	138.90	208.40
24.21	24.60	132.30	102	102	140.80	211.40
24.61	25.00	134.50	103	104	143.20	214.80
25.01	25.48	137.00	105	106	145.80	218.70

## SUPERSEDED PROVISIONS—SOCIAL SECURITY ACT

190 42 FR 24210

337 03/86

I (Primary insurance benefit under 1939 Act, as modified)		II (Primary insurance amount ef- fective for June 1975)	III (Average monthly wage)		IV (Primary insurance amount)	V (Maximum family ben- efits)
If an individual's primary insurance benefit (as deter- mined under subsec. (d)) is—		Or his pri- mary insur- ance amount (as determined under sub- sec. (c)) is—	Or his average monthly wage (as de- termined under sub- sec. (b)) is—		The amount referred to in the pre- ceding para- graphs of this sub- section shall be—	And the maximum amount of benefits payable (as provided in sec. 203(a)) on the basis of his wages and self- employ- ment in- come shall be—
At least—	But not more than—		At least—	But not more than—		
25.49	25.92	139.20	107	107	148.20	222.30
25.93	26.40	141.40	108	109	150.50	225.80
26.41	26.94	143.60	110	113	152.80	229.20
26.95	27.46	145.60	114	118	155.00	232.50
27.47	28.00	147.90	119	122	157.40	236.20
28.01	28.68	150.10	123	127	159.80	239.70
28.69	29.25	152.40	128	132	162.20	243.40
29.26	29.68	154.50	133	136	164.40	246.70
29.69	30.36	156.50	137	141	166.60	249.90
30.37	30.92	158.90	142	146	169.10	253.70
30.93	31.36	161.10	147	150	171.50	257.30
31.37	32.00	163.10	151	155	173.60	260.40
32.01	32.60	165.50	156	160	176.10	264.20
32.61	33.20	167.60	161	164	178.40	267.60
33.21	33.88	169.80	165	169	180.70	271.10
33.89	34.50	172.00	170	174	183.10	274.70
34.51	35.00	174.10	175	178	185.30	278.00
35.01	35.80	176.50	179	183	187.80	281.80
35.81	36.40	178.50	184	188	190.00	285.00
36.41	37.08	180.90	189	193	192.50	289.00
37.09	37.60	183.10	194	197	194.90	292.40
37.61	38.20	185.20	198	202	197.10	295.70
38.21	39.12	187.60	203	207	199.70	299.60
39.13	39.68	189.80	208	211	202.00	303.00
39.69	40.33	191.60	212	216	203.90	305.90
40.34	41.12	194.00	217	221	206.50	309.80
41.13	41.76	196.20	222	225	208.80	313.20
41.77	42.44	198.60	226	230	211.40	317.10
42.45	43.20	200.70	231	235	213.60	320.40
43.21	43.76	203.20	236	239	216.30	324.50
43.77	44.44	205.10	240	244	218.30	328.90
44.45	44.88	207.10	245	249	220.40	335.70
44.89	45.60	209.70	250	253	223.20	341.20
		211.80	254	258	225.40	347.90
		213.60	259	263	227.30	354.50
		216.20	264	267	230.10	359.90
		218.30	268	272	232.30	366.70
		220.60	273	277	234.80	373.30
		222.70	278	281	237.00	378.70
		224.90	282	286	239.30	385.50
		227.30	287	291	241.90	392.30
		229.20	292	295	243.90	397.60
		231.60	296	300	246.50	404.30
		233.80	301	305	248.80	411.10
		235.80	306	309	250.90	416.50
		238.20	310	314	253.50	423.20
		240.20	315	319	255.60	430.00

## SUPERSEDED PROVISIONS—SOCIAL SECURITY ACT

337 03/86

42 FR 24210

191

I (Primary insurance benefit under 1939 Act, as modified)		II (Primary insurance amount ef- fective for June 1975)	III (Average monthly wage)		IV (Primary insurance amount)	V (Maximum family ben- efits)
If an individual's primary insurance benefit (as deter- mined under subsec. (d)) is—		Or his pri- mary insur- ance amount (as determined under sub- sec. (c)) is—	Or his average monthly wage (as de- termined under sub- sec. (b)) is—		The amount referred to in the pre- ceding para- graphs of this sub- section shall be—	And the maximum amount of benefits payable (as provided in sec. 203(a)) on the basis of his wages and self- employ- ment in- come shall be—
At least—	But not more than—		At least—	But not more than—		
		242.30	320	323	257.90	435.40
		244.70	324	328	260.40	442.10
		246.80	329	333	262.60	448.80
		249.30	334	337	265.30	454.30
		251.10	338	342	267.20	460.90
		253.30	343	347	269.60	467.70
		255.80	348	351	272.20	473.00
		257.80	352	356	274.30	479.70
		260.20	357	361	276.90	486.50
		262.30	362	365	279.10	491.90
		264.30	366	370	281.30	498.60
		266.70	371	375	283.80	505.20
		268.90	376	379	286.20	510.90
		271.20	380	384	288.60	517.60
		273.20	385	389	290.70	524.20
		275.30	390	393	293.00	529.60
		277.70	394	398	295.50	536.40
		279.80	399	403	297.80	543.20
		282.30	404	407	300.40	548.40
		284.10	408	412	302.30	555.20
		286.10	413	417	304.50	561.90
		288.20	418	421	306.70	567.30
		290.50	422	426	309.10	574.00
		292.40	427	431	311.20	580.80
		294.20	432	436	313.10	587.50
		296.70	437	440	315.70	590.10
		298.50	441	445	317.70	593.70
		300.50	446	450	319.80	597.00
		302.80	451	454	322.20	599.60
		304.70	455	459	324.30	602.90
		306.80	460	464	326.50	606.20
		308.70	465	468	328.50	609.10
		311.10	469	473	331.10	612.40
		312.80	474	478	332.90	615.80
		314.90	479	482	335.10	618.60
		317.10	483	487	337.40	622.00
		319.10	488	492	339.60	625.40
		321.10	493	496	341.70	628.00
		323.40	497	501	344.10	631.30
		325.20	502	506	346.10	634.60
		327.30	507	510	348.30	637.40
		329.30	511	515	350.40	640.70
		331.50	516	520	352.80	644.20
		333.40	521	524	354.80	646.70
		335.50	525	529	357.00	650.20
		337.80	530	534	359.50	653.50
		339.60	535	538	361.40	656.20



## SUPERSEDED PROVISIONS—SOCIAL SECURITY ACT

192 42 FR 24210

337 03/86

I (Primary insurance benefit under 1939 Act, as modified)		II (Primary insurance amount ef- fective for June 1975)	III (Average monthly wage)		IV (Primary insurance amount)	V (Maximum family ben- efits)
If an individual's primary insurance benefit (as deter- mined under subsec. (d)) is—		Or his pri- mary insur- ance amount (as determined under sub- sec. (c)) is—	Or his average monthly wage (as de- termined under sub- sec. (b)) is—		The amount referred to in the pre- ceding para- graphs of this sub- section shall be—	And the maximum amount of benefits payable (as provided in sec. 203(a)) on the basis of his wages and self- employ- ment in- come shall be—
At least—	But not more than—		At least—	But not more than—		
		341.70	539	543	363.60	659.60
		343.90	544	548	366.00	662.90
		345.90	549	553	368.10	666.30
		347.90	554	556	370.20	668.30
		349.50	557	560	371.90	671.10
		351.50	561	563	374.00	673.10
		353.30	564	567	376.00	675.80
		355.20	568	570	378.00	677.80
		356.90	571	574	379.80	680.40
		358.80	575	577	381.80	682.60
		360.40	578	581	383.50	685.10
		362.40	582	584	385.60	687.20
		364.00	585	588	387.30	689.90
		366.10	589	591	389.60	691.90
		367.90	592	595	391.50	694.60
		369.70	596	598	393.40	696.50
		371.50	599	602	395.30	699.40
		373.30	603	605	397.20	701.40
		375.10	606	609	399.20	703.90
		377.00	610	612	401.20	706.10
		378.80	613	616	403.10	708.80
		380.60	617	620	405.00	711.50
		382.40	621	623	406.90	713.50
		384.20	624	627	408.80	716.20
		386.00	628	630	410.80	718.70
		387.80	631	634	412.70	722.20
		389.70	635	637	414.70	725.60
		391.70	638	641	416.80	729.10
		393.30	642	644	418.50	732.30
		395.20	645	648	420.50	735.90
		396.90	649	652	422.40	739.10
		398.10	653	656	423.60	741.20
		399.20	657	660	424.80	743.30
		400.60	661	665	426.30	746.00
		402.00	666	670	427.80	748.70
		403.50	671	675	429.40	751.20
		404.90	676	680	430.90	754.00
		406.30	681	685	432.40	756.70
		407.90	686	690	434.10	759.30
		409.30	691	695	435.50	762.10
		410.70	696	700	437.00	764.70
		412.20	701	705	438.60	767.40
		413.60	706	710	440.10	770.00
		415.00	711	715	441.60	772.70
		416.50	716	720	443.20	775.40
		417.90	721	725	444.70	778.00
		419.30	726	730	446.20	780.80

## SUPERSEDED PROVISIONS—SOCIAL SECURITY ACT

337 03/86

42 FR 24210

193

I (Primary insurance benefit under 1939 Act, as modified)		II (Primary insurance amount ef- fective for June 1975)	III (Average monthly wage)		IV (Primary insurance amount)	V (Maximum family ben- efits)
If an individual's primary insurance benefit (as deter- mined under subsec. (d)) is—		Or his pri- mary insur- ance amount (as determined under sub- sec. (c)) is—	Or his average monthly wage (as de- termined under sub- sec. (b)) is—		The amount referred to in the pre- ceding para- graphs of this sub- section shall be—	And the maximum amount of benefits payable (as provided in sec. 203(a)) on the basis of his wages and self- employ- ment in- come shall be—
At least—	But not more than—		At least—	But not more than—		
		420.70	731	735	447.70	783.50
		422.20	736	740	449.30	786.10
		423.60	741	745	450.80	788.90
		425.00	746	750	452.20	791.50
		426.30	751	755	453.60	793.80
		427.50	756	760	454.90	796.00
		428.70	761	765	456.20	798.30
		429.90	766	770	457.50	800.50
		431.10	771	775	458.70	802.70
		432.30	776	780	460.00	804.90
		433.50	781	785	461.30	807.10
		434.60	786	790	462.50	809.30
		435.80	791	795	463.70	811.60
		437.00	796	800	465.00	813.80
		438.30	801	805	466.40	816.10
		439.50	806	810	467.70	818.30
		440.70	811	815	469.00	820.60
		441.90	816	820	470.20	822.70
		443.10	821	825	471.50	825.10
		444.30	826	830	472.80	827.20
		445.40	831	835	474.00	829.50
		446.60	836	840	475.20	831.70
		447.80	841	845	476.50	834.00
		449.00	846	850	477.80	836.00
		450.30	851	855	479.20	838.40
		451.50	856	860	480.40	840.60
		452.70	861	865	481.70	842.80
		453.90	866	870	483.00	845.10
		455.10	871	875	484.30	847.30
		456.20	876	880	485.40	849.50
		457.40	881	885	486.70	851.80
		458.60	886	890	488.00	854.00
		459.80	891	895	489.30	856.40
		461.00	896	900	490.60	858.50
		462.30	901	905	491.90	860.80
		463.50	906	910	493.20	863.00
		464.70	911	915	494.50	865.30
		465.90	916	920	495.80	867.30
		467.00	921	925	496.90	869.70
		468.20	926	930	498.20	871.80
		469.40	931	935	499.50	874.10
		470.60	936	940	500.80	876.30
		471.80	941	945	502.00	878.60
		473.00	946	950	503.30	880.80
		474.30	951	955	504.70	883.10
		475.50	956	960	506.00	885.30
		476.70	961	965	507.30	887.50

I (Primary insurance benefit under 1939 Act, as modified)		II (Primary insurance amount ef- fective for June 1975)	III (Average monthly wage)		IV (Primary insurance amount)	V (Maximum family ben- efits)
If an individual's primary insurance benefit (as deter- mined under subsec. (d)) is—		Or his pri- mary insur- ance amount (as determined under sub- sec. (c)) is—	Or his average monthly wage (as de- termined under sub- sec. (b)) is—		The amount referred to in the pre- ceding para- graphs of this sub- section shall be—	And the maximum amount of benefits payable (as provided in sec. 203(a)) on the basis of his wages and self- employ- ment in- come shall be—
At least—	But not more than—		At least—	But not more than—		
		477.80	966	970	508.40	889.80
		479.00	971	975	509.70	892.00
		480.20	976	980	511.00	894.10
		481.40	981	985	512.30	896.40
		482.60	986	990	513.50	898.60
		483.80	991	995	514.80	900.90
		485.00	996	1000	516.10	903.10
		486.00	1001	1005	517.20	905.00
		487.10	1006	1010	518.30	907.10
		488.20	1011	1015	519.50	909.00
		489.30	1016	1020	520.70	911.20
		490.40	1021	1025	521.80	913.10
		491.40	1026	1030	522.90	915.20
		492.50	1031	1035	524.10	917.10
		493.60	1036	1040	525.20	919.10
		494.70	1041	1045	526.40	921.20
		495.80	1046	1050	527.60	923.20
		496.80	1051	1055	528.60	925.10
		497.90	1056	1060	529.80	927.20
		499.00	1061	1065	531.00	929.10
		500.10	1066	1070	532.20	931.30
		501.20	1071	1075	533.30	933.20
		502.20	1076	1080	534.40	935.30
		503.30	1081	1085	535.60	937.20
		504.40	1086	1090	536.70	939.20
		505.50	1091	1095	537.90	941.30
		506.60	1096	1100	539.10	943.30
		507.60	1101	1105	540.10	945.20
		508.70	1106	1110	541.30	947.30
		509.80	1111	1115	542.50	949.20
		510.90	1116	1120	543.60	951.40
		512.00	1121	1125	544.80	953.30
		513.00	1126	1130	545.90	955.40
		514.10	1131	1135	547.10	957.30
		515.20	1136	1140	548.20	959.40
		516.30	1141	1145	549.40	961.40
		517.40	1146	1150	550.60	963.40
		518.40	1151	1155	551.60	965.30
		519.50	1156	1160	552.80	967.40
		520.60	1161	1165	554.00	969.40
		521.70	1166	1170	555.10	971.50
		522.80	1171	1175	556.30	973.40
		523.80	1176	1180	557.40	975.40
		524.80	1181	1185	558.40	977.20
		525.80	1186	1190	559.50	979.10
		526.80	1191	1195	560.60	981.00
		527.80	1196	1200	561.60	982.90



## SUPERSEDED PROVISIONS—SOCIAL SECURITY ACT

337 03/86

42 FR 24210

195

I (Primary insurance benefit under 1939 Act, as modified)		II (Primary insurance amount effective for June 1975)	III (Average monthly wage)		IV (Primary insurance amount)	V (Maximum family benefits)
If an individual's primary insurance benefit (as determined under subsec. (d)) is—		Or his primary insurance amount (as determined under subsec. (c)) is—	Or his average monthly wage (as determined under subsec. (b)) is—		The amount referred to in the preceding paragraphs of this subsection shall be—	And the maximum amount of benefits payable (as provided in sec. 203(a)) on the basis of his wages and self-employment income shall be—
At least—	But not more than—		At least—	But not more than—		
		528.80	1201	1205	562.70	984.70
		529.80	1206	1210	563.80	986.60
		530.80	1211	1215	564.80	988.40
		531.80	1216	1220	565.90	990.30
		532.80	1221	1225	566.90	992.10
		533.80	1226	1230	568.00	994.00
		534.80	1231	1235	569.10	995.80
		535.80	1236	1240	570.10	997.80
		536.80	1241	1245	571.20	999.60
		537.80	1246	1250	572.30	1001.50
		538.80	1251	1255	573.30	1003.30
		539.80	1256	1260	574.40	1005.20
		540.80	1261	1265	575.50	1007.00
		541.80	1266	1270	576.50	1008.90
		542.80	1271	1275	577.60	1010.70

<sup>1</sup>This revised table of benefits was published in the Federal Register on May 14, 1976 (41 FR 19999), as required by P.L. 93-66, §203, as follows:

“(f) Effective June 1, 1974, the Secretary of Health, Education, and Welfare, shall prescribe and publish in the Federal Register such modifications and extensions in the table contained in section 215(a) of the Social Security Act (which shall be determined in the same manner as the revisions in such table provided for under section 215(i)(2)(D) of such Act) as may be necessary to reflect the amendments made by this section; and such modified and extended table shall be deemed to be the table appearing in such section 215(a).” This table was effective through May 1977. For the table effective beginning June 1977, see p. 209.

<sup>2</sup>The Federal Register of June 14, 1976 (41 FR 23993) struck out “23.20” and substituted “24.20”.

---

**Provisions of the Social Security Act as in Effect Prior to  
P.L. 95-30, Approved May 23, 1977 (91 Stat. 126)  
Tax Reduction and Simplification Act of 1977**

**SEC. 452. (a)**

(10) not later than June 30 of each year beginning after December 31, 1975, submit to the Congress a report on all activities undertaken pursuant to the provisions of this part.

**SEC. 458. (a)**

(1) an amount equal to 25 per centum of any amount collected (and required to be distributed as provided in section 457 to reduce or repay assistance payments) which is attributable to the support obligation owed for 12 months; and

(2) an amount equal to 10 per centum of any amount collected (and required to be distributed as provided in section 457 to reduce or repay assistance payments) which is attributable to the support obligation owed for any month after the first twelve months for which such collections are made.

---

**Provision of the Social Security Act as in Effect Prior to  
P.L. 95-83, Approved August 1, 1977 (91 Stat. 383)  
[Public Health Service Act—Medicaid]**

**SEC. 1903.****(m)**

(2)(A) Except as provided in subparagraphs (B) and (C), no payment shall be made under this title to a State with respect to expenditures incurred by it for payment for services provided by any entity—

(i) which is responsible for the provision of—

(I) inpatient hospital services and any other service described in paragraph

(2), (3), (4), (5), or (7) of section 1905(a), or

(II) any three or more of the services described in such paragraphs,

when payment for such services is determined under a prepaid capitation risk basis or under any other risk basis;

(ii) which the Secretary (or the State as authorized by paragraph (3)) has not determined to be a health maintenance organization as defined in paragraph (1); and

(iii) more than one-half of the membership of which consists of individuals who are insured under parts A and B of title XVIII or recipients of benefits under this title.

---

**Provisions of the Social Security Act as in Effect Prior to  
P.L. 95-142, Approved October 25, 1977 (91 Stat. 1175)  
Medicare-Medicaid Anti-Fraud and Abuse Amendments**

**SEC. 1152.**

(e) In order to avoid duplication of functions and unnecessary review and control activities, the Secretary is authorized to waive any or all of the review, certification, or similar activities otherwise required under or pursuant to any provision of this Act (other than this part) where he finds, on the basis of substantial evidence of the effective performance of review and control activities by Professional Standards Review Organizations, that the review, certification, and similar activities otherwise so required are not needed for the provision of adequate review and control.

**SEC. 1155.**

(g) Notwithstanding any other provision of this part, the responsibility for review of health care services of any Professional Standards Review Organization shall be the review of health care services provided by or in institutions, unless such Organization shall have made a request to the Secretary that it be charged with the duty and function of reviewing other health care services and the Secretary shall have approved such request.

## SEC. 1163. (a)

Members of the Council shall be appointed for a term of three years and shall be eligible for reappointment.

(f) The National Professional Standards Review Council shall from time to time, but not less often than annually, submit to the Secretary and to the Congress a report on its activities and shall include in such report the findings of its studies and investigations together with any recommendations it may have with respect to the more effective accomplishment of the purposes and objectives of this part. Such report shall also contain comparative data indicating the results of review activities, conducted pursuant to this part, in each State and in each of the various areas thereof.

## SEC. 1816.

(b) The Secretary shall not enter into an agreement with any agency or organization under this section unless (1) he finds (A) that to do so is consistent with the effective and efficient administration of this part, and (B) that such agency or organization is willing and able to assist the providers to which payments are made through it under this part in the application of safeguards against unnecessary utilization of services furnished by them to individuals entitled to hospital insurance benefits under section 226, and the agreement provides for such assistance, and (2) such agency or organization agrees to furnish to the Secretary such of the information acquired by it in carrying out its agreement under this section as the Secretary may find necessary in performing his functions under this part.

## SEC. 1833.

(f)(1) In the case of the purchase of durable medical equipment included under section 1861(s)(6), by or on behalf of an individual, payment shall be made in such amounts as the Secretary determines to be equivalent to payments that would have been made under this part had such equipment been rented and over such period of time as the Secretary finds such equipment would be used for such individual's medical treatment, except that (A) payment may be made in a lump sum if the Secretary finds that such method of payment is less costly or more practical than periodic payments, and (B) with respect to purchases of used equipment the Secretary is authorized to waive the 20 percent coinsurance amount applicable under subsection (a) whenever the purchase price of such equipment is at least 25 percent less than the reasonable charge for comparable new equipment.<sup>1</sup>

(2) In the case of rental of durable medical equipment, the Secretary may, pursuant to agreements made with suppliers of such equipment, establish any reimbursement procedures (including payment on a lump-sum basis in lieu of prolonged rental payments) which he finds to be equitable, economical, and feasible.<sup>2</sup>

## SEC. 1861.

(j) (11) supplies full and complete information to the Secretary or his delegate as to the identity (A) of each person who has any direct or indirect ownership interest of 10 percent or more in such skilled nursing facility or who is the owner (in whole or in part) of any mortgage, deed of trust, note, or other obligation secured (in whole or in part) by such skilled nursing facility or any of the property or assets of such skilled nursing facility, (B) in case a skilled nursing facility is organized as a corporation, of each officer and director of the corporation, and (C) in case a skilled nursing facility is organized as a partnership, of each partner; and promptly reports any changes which would affect the current accuracy of the information so required to be supplied;

## SEC. 1862.

(d)(1)

(C) has furnished services or supplies which are determined by the Secretary, with the concurrence of the members of the appropriate program review team appointed pursuant to paragraph (4) who are physicians or other professional personnel in the health care field, to be substantially in excess of the needs of individuals or to be harmful to individuals or to be of a grossly inferior quality.

(4) For the purposes of paragraph (1)(B) and (C) of this subsection, and clause (F) of section 1866(b)(2), the Secretary shall, after consultation with appropriate State and local professional societies, the appropriate carriers and intermediaries utilized in the administration of this title, and consumer representatives familiar with the health needs of residents of the State, appoint one or more program review teams (composed of physicians, other professional personnel in the health care field, and consumer representatives) in each State which shall, among other things—

<sup>1</sup>As in original. Second period should be deleted.

<sup>2</sup>Misaligned, as in public law.



(A) undertake to review such statistical data on program utilization as may be submitted by the Secretary,

(B) submit to the Secretary periodically, as may be prescribed in regulations, a report on the results of such review, together with recommendations with respect thereto,

(C) undertake to review particular cases where there is a likelihood that the person or persons furnishing services and supplies to individuals may come within the provisions of paragraph (1)(B) and (C) of this subsection or clause (F) of section 1866(b)(2), and

(D) submit to the Secretary periodically, as may be prescribed in regulations, a report of cases reviewed pursuant to subparagraph (C) along with an analysis of, and recommendations with respect to, such cases.

Sec. 1866.

(b)

(2) (F) that such provider has furnished services or supplies which are determined by the Secretary, with the concurrence of the members of the appropriate program review team appointed pursuant to section 1862(d)(4) who are physicians or other professional personnel in the health care field, to be substantially in excess of the needs of individuals or to be harmful to individuals or to be of a grossly inferior quality.

#### PENALTIES

SEC. 1877. (a) Whoever—

(1) knowingly and willfully makes or causes to be made any false statement or representation of a material fact in any application for any benefit or payment under this title,

(2) at any time knowingly and willfully makes or causes to be made any false statement or representation of a material fact for use in determining rights to any such benefit or payment,

(3) having knowledge of the occurrence of any event affecting (A) his initial or continued right to any such benefit or payment, or (B) the initial or continued right to any such benefit or payment of any other individual in whose behalf he has applied for or is receiving such benefit or payment, conceals or fails to disclose such event with an intent fraudulently to secure such benefit or payment either in a greater amount or quantity than is due or when no such benefit or payment is authorized, or

(4) having made application to receive any such benefit or payment for the use and benefit of another and having received it, knowingly and willfully converts such benefit or payment or any part thereof to a use other than for the use and benefit of such other person,

shall be guilty of a misdemeanor and upon conviction thereof shall be fined not more than \$10,000 or imprisoned for not more than one year, or both.

(b) Whoever furnishes items or services to an individual for which payment is or may be made under this title and who solicits, offers, or receives any—

(1) kickback or bribe in connection with the furnishing of such items or services or the making or receipt of such payment, or

(2) rebate of any fee or charge for referring any such individual to another person for the furnishing of such items or services,

shall be guilty of a misdemeanor and upon conviction thereof shall be fined not more than \$10,000 or imprisoned for not more than one year, or both.

(c) Whoever knowingly and willfully makes or causes to be made, or induces or seeks to induce the making of, any false statement or representation of a material fact with respect to the conditions or operation of any institution or facility in order that such institution or facility may qualify (either upon initial certification or upon recertification) as a hospital, skilled nursing facility, or home health agency (as those terms are defined in section 1861), shall be guilty of a misdemeanor and upon conviction thereof shall be fined not more than \$2,000 or imprisoned for not more than 6 months, or both.

SEC. 1902. (a)

(32) provide that no payment under the plan for any care or service provided to an individual by a physician, dentist, or other individual practitioner shall be made to anyone other than such individual or such physician, dentist, or practitioner, except that payment may be made (A) to the employer of such physician, dentist, or practitioner if such physician, dentist, or practitioner is required as a condition of his employment to turn over his fee for such care or service to his employer, or (B) (where the care or service was provided in a hospital, clinic, or other facility) to the facility in which the care or service was provided if there is a contractual arrangement between such physician, dentist, or

practitioner and such facility under which such facility submits the bill for such care or service;

(35) effective January 1, 1973, provide that any intermediate care facility receiving payments under such plan must supply to the licensing agency of the State full and complete information as to the identity (A) of each person having (directly or indirectly) an ownership interest of 10 per centum or more in such intermediate care facility or who is the owner (in whole or in part) of any mortgage, deed of trust, note, or other obligation secured (in whole or in part) by such intermediate care facility or any of the property or assets of such intermediate care facility, (B) in case an intermediate care facility is organized as a corporation, of each officer and director of the corporation, and (C) in case an intermediate care facility is organized as a partnership, of each partner; and promptly report any changes which would affect the current accuracy of the information so required to be supplied;

#### PENALTIES

##### SEC. 1909. (a) Whoever—

(1) knowingly and willfully makes or causes to be made any false statement or representation of a material fact in any application for any benefit or payment under a State plan approved under this title,

(2) at any time knowingly and willfully makes or causes to be made any false statement or representation of a material fact for use in determining rights to such benefit or payment,

(3) having knowledge of the occurrence of any event affecting (A) his initial or continued right to any such benefit or payment, or (B) the initial or continued right to any such benefit or payment of any other individual in whose behalf he has applied for or is receiving such benefit or payment, conceals or fails to disclose such event with an intent fraudulently to secure such benefit or payment either in a greater amount or quantity than is due or when no such benefit or payment is authorized, or

(4) having made application to receive any such benefit or payment for the use and benefit of another and having received it, knowingly and willfully converts such benefit or payment or any part thereof to a use other than for the use and benefit of such other person,

shall be guilty of a misdemeanor and upon conviction thereof shall be fined not more than \$10,000 or imprisoned for not more than one year, or both.

(b) Whoever furnishes items or services to an individual for which payment is or may be made in whole or in part out of Federal funds under a State plan approved under this title and who solicits, offers, or receives any—

(1) kickback or bribe in connection with the furnishing of such items or services or the making or receipt of such payment, or

(2) rebate of any fee or charge for referring any such individual to another person for the furnishing of such items or services

shall be guilty of a misdemeanor and upon conviction thereof shall be fined not more than \$10,000 or imprisoned for not more than one year, or both.

(c) Whoever knowingly and willfully makes or causes to be made, or induces or seeks to induce the making of, any false statement or representation of a material fact with respect to the conditions or operation of any institution or facility in order that such institution or facility may qualify (either upon initial certification or upon recertification) as a hospital, skilled nursing facility, intermediate care facility, or home health agency (as those terms are employed in this title) shall be guilty of a misdemeanor and upon conviction thereof shall be fined not more than \$2,000 or imprisoned for not more than 6 months, or both.

---

#### Provisions of the Social Security Act as in Effect Prior to P.L. 95-210, Approved December 13, 1977 (91 Stat. 1485) [Social Security—Rural Health Clinic Services]

##### SEC. 1905.

(a)

(2) outpatient hospital services;

#### [SEC. 1910.]

#### CERTIFICATION AND APPROVAL OF SKILLED NURSING FACILITIES



**Provisions of the Social Security Act as in Effect Prior to  
P.L. 95-216, Approved December 20, 1977 (91 Stat. 1509)  
Social Security Amendments of 1977**

**SEC. 201.**

(b)

(1) (G) 1.2 per centum of the wages (as so defined) paid after December 31, 1977, and before January 1, 1981, and so reported, (H) 1.3 per centum of the wages (as so defined) paid after December 31, 1980, and before January 1, 1986, and so reported, (I) 1.4 per centum of the wages (as so defined) paid after December 31, 1985, and before January 1, 2011, and so reported, and (J) 1.7 per centum of the wages (as so defined) paid after December 31, 2010, and so reported,

(2) (G) 0.850 of 1 per centum of the amount of self-employment income (as so defined) so reported for any taxable year beginning after December 31, 1977, and before January 1, 1981, (H) 0.920 of 1 per centum of the amount of self-employment income (as so defined) so reported for any taxable year beginning after December 31, 1980, and before January 1, 1986, (I) 0.990 of 1 per centum of the amount of self-employment income (as so defined) so reported for any taxable year beginning after December 31, 1985, and before January 1, 2011, and (J) 1 per centum of the amount of self-employment income (as so defined) so reported for any taxable year beginning after December 31, 2010,

**SEC. 202.**

(c)(1)

(C) was receiving at least one-half of his support, as determined in accordance with regulations prescribed by the Secretary, from such individual—

(i) if she had a period of disability which did not end prior to the month in which she became entitled to old-age or disability insurance benefits, at the beginning of such period or at the time she became entitled to such benefits, or

(ii) if she did not have such a period of disability, at the time she became entitled to such benefits, and filed proof of such support within two years after the month in which she filed application with respect to such period of disability or after the month in which she became entitled to such benefits, as the case may be, or, if she did not have such a period, two years after the month in which she became entitled to such benefits, and

(2) The provisions of subparagraph (C) of paragraph (1) shall (subject to subsection (s)) not be applicable in the case of any husband who—

(A) in the month prior to the month of his marriage to such individual was entitled to, or on application therefor and attainment of age 62 in such prior month would have been entitled to, benefits under subsection (f) or (h);

(B) in the month prior to the month of his marriage to such individual had attained age eighteen and was entitled to, or on application therefor would have been entitled to, benefits under subsection (d); or

(C) in the month prior to the month of his marriage to such individual he was entitled to, or on application therefor and attainment of the required age (if any) would have been entitled to, a widower's, child's (after attainment of age 18), or parent's insurance annuity under section 5 of the Railroad Retirement Act of 1937, as amended.

(e)

(4) If a widow, after attaining the age of 60, marries an individual (other than one described in subparagraph (A) or (B) of paragraph (3)), such marriage shall, for purposes of paragraph (1), be deemed not to have occurred; except that, notwithstanding the provisions of paragraph (2) and subsection (q), such widow's insurance benefit for the month in which such marriage occurs and each month thereafter prior to the month in which the husband dies or such marriage is otherwise terminated, shall be equal to one-half of the primary insurance amount of the deceased individual on whose wages and self-employment income such benefit is based.

(f)(1)

(D)(i) was receiving at least one-half of his support, as determined in accordance with regulations prescribed by the Secretary, from such individual at the time of her death or, if such individual had a period of disability which did not end prior to the month in which she died, at the time such period began or at the time of her death, and filed proof of such support within two years after the date of such



death, or, if she had such a period of disability, within two years after the month in which she filed application with respect to such period of disability or two years after the date of such death, as the case may be, or (ii) was receiving at least one-half of his support, as determined in accordance with regulations prescribed by the Secretary from such individual at the time she became entitled to old-age or disability insurance benefits or, if such individual had a period of disability which did not end prior to the month in which she became so entitled, at the time such period began or at the time she became entitled to such benefits, and filed proof of such support within two years after the month in which she became entitled to such benefits, or, if she had such a period of disability, within two years after the month in which she filed application with respect to such period of disability or two years after the month in which she became entitled to such benefits, as the case may be, and

(2) The provisions of subparagraph (D) of paragraph (1) shall (subject to subsection (s)) not be applicable in the case of any individual who—

(A) in the month prior to the month of his marriage to such individual was entitled to, or on application therefor and attainment of age 62 in such prior month would have been entitled to, benefits under this subsection or subsection (h);

(B) in the month prior to the month of his marriage to such individual had attained age eighteen and was entitled to, or on application therefor would have been entitled to, benefits under subsection (d); or

(C) in the month prior to the month of his marriage to such individual he was entitled to, or on application therefor and attainment of the required age (if any), would have been entitled to, a widower's, child's (after attainment of age 18), or parent's insurance annuity under section 5 of the Railroad Retirement Act of 1937, as amended.

(5) If a widower, after attaining the age of 60, marries an individual (other than one described in subparagraph (A) or (B) of paragraph (4)), such marriage shall, for purposes of paragraph (1), be deemed not to have occurred; except that, notwithstanding the provisions of paragraph (3) and subsection (q), such widower's insurance benefit for the month in which such marriage occurs and each month thereafter prior to the month in which the wife dies or such marriage is otherwise terminated, shall be equal to one-half of the primary insurance amount of the deceased individual on whose wages and self-employment income such benefit is based.

(m)(1) In any case in which an individual is entitled to a monthly benefit under this section on the basis of the wages and self-employment income of a deceased individual for any month and no other person is (without the application of subsection (j)(1)) entitled to a monthly benefit under this section for such month on the basis of such wages and self-employment income, such individual's benefit amount for such month, prior to reduction under subsection (k)(3), shall be not less than the first amount appearing in column IV of the table in (or deemed to be in) section 215(a), except as provided in paragraph (2).

SEC. 203. (a) Whenever the total monthly benefits to which individuals are entitled under sections 202 and 223 for a month on the basis of the wages and self-employment income of an insured individual is greater than the amount appearing in column V of the table in (or deemed to be in) section 215(a) on the line on which appears in column IV such insured individual's primary insurance amount, such total of benefits shall be reduced to such amount; except that—

(1) when any of such individuals so entitled would (but for the provisions of section 202(k)(2)(A)) be entitled to child's insurance benefits on the basis of the wages and self-employment income of one or more other insured individuals, such total of benefits shall not be reduced to less than the smaller of: (A) the sum of the maximum amounts of benefits payable on the basis of the wages and self-employment income of all such insured individuals, or (B) the last figure in column V of the table appearing in section 215(a), or

(2) when two or more persons were entitled (without the application of section 202(j)(1) and section 223(b)) to monthly benefits under section 202 or 223 for January 1971 or any prior month on the basis of the wages and self-employment income of such insured individual and the provisions of this subsection as in effect for any such month were applicable in determining the benefit amount of any persons on the basis of such wages and self-employment income, the total of benefits for any month after January 1971 shall not be reduced to less than the largest of—

(A) the amount determined under this subsection without regard to this paragraph,

(B) the largest amount which has been determined for any month under this subsection for persons entitled to monthly benefits on the basis of such insured individual's wages and self-employment income, or

(C) if any persons are entitled to benefits on the basis of such wages and self-employment income for the month before the effective month (after September 1972) of a general benefit increase under this title (as defined in section 215(i)(3)) or a benefit increase under the provisions of section 215(i), an amount equal to the sum of amounts derived by multiplying the benefit amount determined under this title (excluding any part thereof determined under section 202(w)) for the month before such effective month (including this subsection, but without the application of section 222(b), section 202(q), and subsections (b), (c), and (d) of this section), for each such person for such month, by a percentage equal to the percentage of the increase provided under such benefit increase (with any such increased amount which is not a multiple of \$0.10 being rounded to the next higher multiple of \$0.10);

but in any such case (i) paragraph (1) of this subsection shall not be applied to such total of benefits after the application of subparagraph (B) or (C), and (ii) if section 202(k)(2)(A) was applicable in the case of any such benefits for a month, and ceases to apply for a month after such month, the provisions of subparagraph (B) or (C) shall be applied, for and after the month in which section 202(k)(2)(A) ceases to apply, as though paragraph (1) had not been applicable to such total of benefits for the last month for which subparagraph (B) or (C) was applicable, or

(3) when any of such individuals is entitled to monthly benefits as a divorced wife under section 202(b) or as a surviving divorced wife under section 202(e) for any month, the benefit to which she is entitled on the basis of the wages and self-employment income of such insured individual for such month shall be determined without regard to this subsection, and the benefits of all other individuals who are entitled for such month to monthly benefits under section 202 on the wages and self-employment income of such insured individual shall be determined as if no such divorced wife or surviving divorced wife were entitled to benefits for such month,

(4) notwithstanding any other provision of law, when—

(A) two or more persons are entitled to monthly benefits for a particular month on the basis of the wages and self-employment income of an insured individual and (for such particular month) the provisions of this subsection and section 202(q) are applicable to such monthly benefits, and

(B) such individual's primary insurance amount is increased for the following month under any provision of this title,

then the total of monthly benefits for all persons on the basis of such wages and self-employment income for such particular month, as determined under the provisions of this subsection, shall for purposes of determining the total monthly benefits for all persons on the basis of such wages and self-employment income for months subsequent to such particular month to be considered to have been increased by the smallest amount that would have been required in order to assure that the total of monthly benefits payable on the basis of such wages and self-employment income for any such subsequent month will not be less (after the application of the other provisions of this subsection and section 202(q) than the total of monthly benefits (after the application of the other provisions of this subsection and section 202(q)) payable on the basis of such wages and self-employment income for such particular month, or

(5) whenever the monthly benefits of such individuals are based on an insured individual's primary insurance amount which is determined under section 215(a)(3) and such primary insurance amount does not appear in column IV of the table in (or deemed to be in) section 215(a), the applicable maximum amount in column V of such table shall be the amount in such column that appears on the line on which the next higher primary insurance amount appears in column IV, or, if larger, the largest amount determined for such persons under this subsection for any month prior to October 1972.

In any case in which benefits are reduced pursuant to the preceding provisions of this subsection, such reduction shall be made after any deductions under this section and after any deductions under section 222(b). Whenever a reduction is made under this subsection in the total of monthly benefits to which individuals are entitled for any month on the basis of the wages and self-employment income of an insured individual, each such benefit other than the old-age or disability insurance benefit shall be proportionately decreased; except that if such total of benefits for such month includes any benefit or benefits under section 202(d) which are payable solely by reason of section 216(h)(3), the reduction shall be first applied to reduce (proportionately where there is more than one benefit so payable) the benefits so payable (but not below zero).



(f)  
(8)  
(B)

(ii) the product of the exempt amount described in clause (i) and the ratio of (I) the average of the wages of all employees as reported to the Secretary of the Treasury for the calendar year preceding the calendar year in which the determination under subparagraph (A) was made to (II) the average of the wages of all employees as reported to the Secretary of the Treasury for the calendar year 1973, or, if later, the calendar year preceding the most recent calendar year in which an increase in the exempt amount was enacted or a determination resulting in such an increase was made under subparagraph (A), with such product, if not a multiple of \$10, being rounded to the next higher multiple of \$10 where such product is a multiple of \$5 but not of \$10 and to the nearest multiple of \$10 in any other case. For purposes of this clause (ii), the average of the wages for the calendar year 1978 (or any prior calendar year) shall, in the case of determinations made under subparagraph (A) prior to December 31, 1979, be deemed to be an amount equal to 400 per centum of the amount of the average of the taxable wages of all employees as reported to the Secretary for the first calendar quarter of such calendar year.

#### SEC. 210.

(a) (10)(A) Service performed in any calendar quarter in the employ of any organization exempt from income tax under section 101 of the Internal Revenue Code, if the remuneration for such service is less than \$50;

#### CREDITING OF SELF-EMPLOYMENT INCOME TO CALENDAR QUARTERS

SEC. 212. For the purposes of determining average monthly wage and quarters of coverage the amount of self-employment income derived during any taxable year shall be credited to calendar quarters as follows:

(a) In the case of a taxable year which is a calendar year the self-employment income of such taxable year shall be credited equally to each quarter of such calendar year.

(b) In the case of any other taxable year the self-employment income shall be credited equally to the calendar quarter in which such taxable year ends and to each of the next three or fewer preceding quarters any part of which is in such taxable year.

#### SEC. 213. (a)

(2) The term "quarter of coverage" means a quarter in which the individual has been paid \$50 or more in wages (except wages for agricultural labor paid after 1954) or for which he has been credited (as determined under section 212) with \$100 or more of self-employment income, except that—

(i) no quarter after the quarter in which such individual died shall be a quarter of coverage, and no quarter any part of which was included in a period of disability (other than the initial quarter and the last quarter of such period) shall be a quarter of coverage;

(ii) if the wages paid to any individual in any calendar year equal \$3,000 in the case of a calendar year before 1951, or \$3,600 in the case of a calendar year after 1950 and before 1955, or \$4,200 in the case of a calendar year after 1954 and before 1959, or \$4,800 in the case of a calendar year after 1958 and before 1966, or \$6,600 in the case of a calendar year after 1965 and before 1968, or \$7,800 in the case of a calendar year after 1967 and before 1972, or \$9,000 in the case of a calendar year after 1971 and before 1973, or \$10,800 in the case of a calendar year after 1972 and before 1974, or \$13,200 in the case of a calendar year after 1973 and before 1975, or an amount equal to the contribution and benefit base (as determined under section 230) in the case of any calendar year after 1974 with respect to which such contribution and benefit base is effective, each quarter of such year shall (subject to clause (i)) be a quarter of coverage;

(iii) if an individual has self-employment income for a taxable year, and if the sum of such income and the wages paid to him during such year equals \$3,600 in the case of a taxable year beginning after 1950 and ending before 1955, or \$4,200 in the case of a taxable year ending after 1954 and before 1959, or \$4,800 in the case of a taxable year ending after 1958 and before 1966, or \$6,600 in the case of a taxable year after ending 1965 and before 1968, or \$7,800 in the case of a taxable year ending after 1967 and beginning before 1972, or \$9,000 in the case of a taxable year beginning after 1971 and before 1973, or \$10,800 in the case of a taxable year beginning after 1972 and before 1974, or \$13,200 in the case of a taxable year beginning after 1973 and before 1975, or an amount equal to the



contribution and benefit base (as determined under section 230) which is effective for the calendar year in the case of any taxable year beginning in any calendar year after 1974, each quarter any part of which falls in such year shall (subject to clause (i)) be a quarter of coverage;

(iv) if an individual is paid wages for agricultural labor in a calendar year after 1954, then, subject to clause (i), (a) the last quarter of such year which can be but is not otherwise a quarter of coverage shall be a quarter of coverage if such wages equal or exceed \$100 but are less than \$200; (b) the last two quarters of such year which can be but are not otherwise quarters of coverage shall be quarters of coverage if such wages equal or exceed \$200 but are less than \$300; (c) the last three quarters of such year which can be but are not otherwise quarters of coverage shall be quarters of coverage if such wages equal or exceed \$300 but are less than \$400; and (d) each quarter of such year which is not otherwise a quarter of coverage shall be a quarter of coverage if such wages are \$400 or more; and

(v) no quarter shall be counted as a quarter of coverage prior to the beginning of such quarter.

If, in the case of any individual who has attained age 62 or died or is under a disability and who has been paid wages for agricultural labor in a calendar year after 1954, the requirements for insured status in subsection (a) or (b) of section 214, the requirements for entitlement to a computation or recomputation of his primary insurance amount, or the requirements of paragraph (3) of section 216(i) are not met after assignment of quarters of coverage to quarters in such year as provided in clause (iv) of the preceding sentence, but would be met if such quarters of coverage were assigned to different quarters in such year, then such quarters of coverage shall instead be assigned, for purposes only of determining compliance with such requirements, to such different quarters. If, in the case of an individual who did not die prior to January 1, 1955, and who attained age 62 (if a woman) or age 65 (if a man) or died before July 1, 1957, the requirements for insured status in section 214(a)(3) are not met because of his having too few quarters of coverage but would be met if his quarters of coverage in the first calendar year in which he had any covered employment had been determined on the basis of the period during which wages were earned rather than on the basis of the period during which wages were paid (any such wages paid that are reallocated on an earned basis shall not be used in determining quarters of coverage for subsequent calendar years), then upon application filed by the individual or his survivors and satisfactory proof of his record of wages earned being furnished by such individual or his survivors, the quarters of coverage in such calendar year may be determined on the basis of the periods during which wages were earned.

SEC. 215. (a)<sup>1</sup> The primary insurance amount of an insured individual shall be determined as follows:

(1) Subject to the conditions specified in subsections (b), (c), and (d) of this section and except as provided in paragraphs (2) and (3) of this subsection, such primary insurance amount shall be whichever of the following amounts is the largest:

(A) the amount in column IV of the following table (or, if larger, the amount in column IV of the latest table deemed to be such table under subsection (i)(2)(D)) on the line on which in column III of such table appears his average monthly wage (as determined under subsection (b));

(B) the amount in column IV of such table on the line on which in column II appears his primary insurance amount (as determined under subsection (c)); or

(C) the amount in column IV of such table on the line on which in column I appears his primary insurance benefit (as determined under subsection (d)).

(2) In the case of an individual who was entitled to a disability insurance benefit for the month before the month in which he died, became entitled to old-age insurance benefits, or attained age 65, such primary insurance amount shall be—

(A) the amount in column IV of such table which is equal to the primary insurance amount upon which such disability insurance benefit is based; except that if such individual was entitled to a disability insurance benefit under section 223 for the month before the effective month of a new table (whether enacted by another law or deemed to be such table under subsection (i)(2)(D)) and in the following month became entitled to an old-age insurance benefit, or he died in such following month, then his primary insurance amount for such following month shall be the amount in column IV of the new table on the line on which in column II of such table appears his primary insurance amount for the month before the effective month of the table (as determined under subsection (c)) instead of the amount in column IV equal to

<sup>1</sup>P.L. 95-216, §201(a), amended §215(a) in its entirety and substituted a different method for determining the primary insurance amount on new claims.

the primary insurance amount on which his disability insurance benefit is based. For purposes of this paragraph, the term "primary insurance amount" with respect to any individual means only a primary insurance amount determined under paragraph (1) (and such individual's benefits shall be deemed to be based upon the primary insurance amount as so determined); or

(B) an amount equal to the primary insurance amount upon which such disability insurance benefit is based if such primary insurance amount was determined under paragraph (3).

(3) Such primary insurance amount shall be an amount equal to \$9.00 multiplied by the individual's years of coverage in excess of 10 in any case in which such amount is higher than the individual's primary insurance amount as determined under paragraph (1) or (2).

For purposes of paragraph (3), an individual's "years of coverage" is the number (not exceeding 30) equal to the sum of (i) the number (not exceeding 14 and disregarding any fraction) determined by dividing the total of the wages credited to him (including wages deemed to be paid prior to 1951 to such individual under section 217, compensation under the Railroad Retirement Act of 1937 prior to 1951 which is creditable to such individual pursuant to this title, and wages deemed to be paid prior to 1951 to such individual under section 231) for years after 1936 and before 1951 by \$900, plus (ii) the number equal to the number of years after 1950 each of which is a computation base year (within the meaning of subsection (b)(2)(C)) and in each of which he is credited with wages (including wages deemed to be paid to such individual under section 217, compensation under the Railroad Retirement Act of 1937 which is creditable to such individual pursuant to this title, and wages deemed to be paid to such individual under section 229) and self-employment income of not less than 25 percent of the maximum amount which, pursuant to subsection (e), may be counted for such year.

(b)(1) For the purposes of column III of the table appearing in subsection (a) of this section, an individual's "average monthly wage" shall be the quotient obtained by dividing—

(A) the total of his wages paid in and self-employment income credited to his "benefit computation years" (determined under paragraph (2)), by

(B) the number of months in such years.

(2)(A) The number of an individual's "benefit computation years" shall be equal to the number of elapsed years (determined under paragraph (3) of this subsection), reduced by five; except that the number of an individual's benefit computation years shall in no case be less than two.

(B) An individual's "benefit computation years" shall be those computation base years, equal in number to the number determined under subparagraph (A), for which the total of his wages and self-employment income is the largest.

(C) For purposes of subparagraph (B), "computation base years" include only calendar years in the period after 1950 and prior to the earlier of the following years—

(i) the year in which occurred (whether by reason of section 202(j)(1) or otherwise) the first month for which the individual was entitled to old-age insurance benefits, or

(ii) the year succeeding the year in which he died.

Any calendar year all of which is included in a period of disability shall not be included as a computation base year.

(3) For purposes of paragraph (2), the number of an individual's elapsed years is the number of calendar years after 1950 (or, if later, the year in which he attained age 21) and before the year in which he died, or if it occurred earlier but after 1960, the year in which he attained age 62. For purposes of the preceding sentence, any calendar year any part of which was included in a period of disability shall not be included in such number of calendar years.

(4) The provisions of this subsection shall be applicable only in the case of an individual—

(A) who becomes entitled to benefits under section 202(a) or section 223 in or after the month in which a new table that appears in (or is deemed by subsection (i)(2)(D) to appear in) subsection (a) becomes effective; or

(B) who dies in or after the month in which such table becomes effective without being entitled to benefits under section 202(a) or section 223; or

(C) whose primary insurance amount is required to be recomputed under subsection (f)(2).

#### Primary Insurance Amount Under Prior Provisions

(c)(1) For the purposes of column II of the latest table that appears in (or is deemed to appear in) subsection (a) of this section, an individual's primary insurance amount



## SUPERSEDED PROVISIONS—SOCIAL SECURITY ACT

shall be computed on the basis of the law in effect prior to the month in which the latest such table became effective.

(2) The provisions of this subsection shall be applicable only in the case of an individual who became entitled to benefits under section 202(a) or section 223, or who died, before such effective month.

(d)(1) For purposes of column I of the table appearing in subsection (a) of this section, an individual's primary insurance benefit shall be computed as follows:

(A) The individual's average monthly wage shall be determined as provided in subsection (b) (but without regard to paragraph (4) thereof) of this section, except that for purposes of paragraph (2)(C) and (3) of such subsection, 1936 shall be used instead of 1950.

(B) For purposes of subparagraphs (B) and (C) of subsection (b)(2), an individual whose total wages prior to 1951 (as defined in subparagraph (C) of this subsection)—

(i) do not exceed \$27,000 shall be deemed to have been paid such wages in equal parts in nine calendar years after 1936 and prior to 1951;

(ii) exceed \$27,000 and are less than \$42,000 shall be deemed to have been paid (I) \$3,000 in each of such number of calendar years after 1936 and prior to 1951 as is equal to the integer derived by dividing such total wages by \$3,000, and (II) the excess of such total wages over the product of \$3,000 times such integer, in an additional calendar year in such period; or

(iii) are at least \$42,000 shall be deemed to have been paid \$3,000 in each of the fourteen calendar years after 1936 and prior to 1951.

(D) The individual's primary insurance benefit shall be 45.6 per centum of the first \$50 of his average monthly wage as computed under this subsection, plus 11.4 per centum of the next \$200 of such average monthly wage.

(3)

(A) who attained age 21 after 1936 and prior to 1951, or

(B) who had a period of disability which began prior to 1951, but only if the primary insurance amount resulting therefrom is higher than the primary insurance amount resulting from the application of this section (as amended by the Social Security Amendments of 1967) and section 220.

(f)

(2) If an individual has wages or self-employment income for a year after 1965 for any part of which he is entitled to old-age insurance benefits, the Secretary shall, at such time or times and within such period as he may by regulations prescribe, recompute such individual's primary insurance amount with respect to each such year. Such recomputation shall be made as provided in subsections (a)(1)(A) and (C) and (a)(3) as though the year with respect to which such recomputation is made is the last year of the period specified in subsection (b)(2)(C). A recomputation under this paragraph with respect to any year shall be effective—

(A) in the case of an individual who did not die in such year, for monthly benefits beginning with benefits for January of the following year; or

(B) in the case of an individual who died in such year, for monthly benefits beginning with benefits for the month in which he died.

(3) In the case of any individual who became entitled to old-age insurance benefits in 1952 or in a taxable year which began in 1952 (and without the application of section 202(j)(1)), or who died in 1952 or in a taxable year which began in 1952 but did not become entitled to such benefits prior to 1952, and who had self-employment income for a taxable year which ended within or with 1952 or which began in 1952, then upon application filed by such individual after the close of such taxable year and prior to January 1961 or (if he died without filing such application and such death occurred prior to January 1961) by a person entitled to monthly benefits on the basis of such individual's wages and self-employment income, the Administrator shall recompute such individual's primary insurance amount. Such recomputation shall be made in the manner provided in the preceding subsections of this section (other than subsection (b)(4)(A)) for computation of such amount, except that (A) the self-employment income closing date shall be the day following the quarter with or within which such taxable year ended, and (B) the self-employment income for any subsequent taxable year shall not be taken into account. Such recomputation shall be effective (A) in the case of an application filed by such individual, for and after the first month in which he became entitled to old-age insurance benefits, and (B) in the case of an application filed by any other person, for and after the month in which such person who filed such application for recomputation became entitled to such monthly benefits. No recomputation under this paragraph pursuant to an application filed after such individual's death shall affect the amount of the lump-sum death payment under subsection (i) of section 202, and no such recomputation shall render erroneous any such payment certified by the Administrator prior to the effective date of the recomputation.



(4) Any recomputation under this subsection shall be effective only if such recomputation results in a higher primary insurance amount.

(i)  
(2)(A)

(ii) If the Secretary determines that the base quarter in any year is a cost-of-living computation quarter, he shall, effective with the month of June of such year as provided in subparagraph (B), increase the benefit amount of each individual who for such month is entitled to benefits under section 227 or 228, and the primary insurance amount of each other individual under this title (but not including a primary insurance amount determined under subsection (a)(3) of this section), by an amount derived by multiplying each such amount (including each such individual's primary insurance amount or benefit amount under section 227 or 228 as previously increased under this subparagraph) by the same percentage (rounded to the nearest one-tenth of 1 percent) as the percentage by which the Consumer Price Index for such cost-of-living computation quarter exceeds such index for the most recent prior calendar quarter which was a base quarter under paragraph (1)(A)(ii) or, if later, the most recent cost-of-living computation quarter under paragraph (1)(B). Any such increased amount which is not a multiple of \$0.10 shall be increased to the next higher multiple of \$0.10.

(D) He shall also publish in the Federal Register at that time (along with the increased benefit amounts which shall be deemed to be the amounts appearing in sections 227 and 228) a revision of the table of benefits contained in subsection (a) of this section (as it may have been most recently revised by another law or pursuant to this paragraph); and such revised table shall be deemed to be the table appearing in such subsection (a). Such revision shall be determined as follows:

(i) The headings of the table shall be the same as the headings in the table immediately prior to its revision, except that the parenthetical phrase at the beginning of column II shall reflect the year in which the primary insurance amounts set forth in column IV of the table immediately prior to its revision were effective.

(ii) The amounts on each line of column I and column III, except as otherwise provided by clause (v) of this subparagraph, shall be the same as the amounts appearing in each such column in the table immediately prior to its revision.

(iii) The amount on each line of column II shall be changed to the amount shown on the corresponding line of column IV of the table immediately prior to its revision.

(iv) The amounts on each line of column IV and column V shall be increased from the amounts shown in the table immediately prior to its revision by increasing each such amount by the percentage specified in subparagraph (A)(ii) of this paragraph. The amount on each line of column V shall be increased, if necessary, so that such amount is at least equal to one and one-half times the amount shown on the corresponding line in column IV. Any such increased amount which is not a multiple of \$0.10 shall be increased to the next higher multiple of \$0.10.

(v) If the contribution and benefit base (determined under section 230) for the calendar year in which the table of benefits is revised is lower than such base for the following calendar year, columns III, IV, and V of such table shall be extended. The amounts on each additional line of column III shall be the amounts on the preceding line increased by \$5 until in the last such line of column III the second figure is equal to, or exceeds by less than \$5,<sup>2</sup> one-twelfth of the new contribution and benefit base for the calendar year following the calendar year in which such table of benefits is revised. The amount on each additional line of column IV shall be the amount on the preceding line increased by \$1.00, until the amount on the last line of such column is equal to the last line of such column as determined under clause (iv) plus 20 percent of the excess of the second figure in the last line of column III as extended under the preceding sentence over such second figure<sup>3</sup> for the calendar year in which the table of benefits is revised. The amount in each additional line of column V shall be equal to 1.75 times the amount on the same line of column IV. Any such increased amount which is not a multiple of \$0.10 shall be increased to the next higher multiple of \$0.10.

<sup>2</sup>P.L. 95-216, §103(d)(1), inserted "or exceeds by less than \$5," effective with respect to remuneration paid or received, and taxable years beginning, after 1977.

<sup>3</sup>P.L. 95-216, §103(d)(2), struck out "one-twelfth of the excess of the new contribution and benefit base for the calendar year following the calendar year in which such table of benefits is revised (as determined under section 230) over such base" and substituted "the excess of the second figure in the last line of column III as extended under the preceding sentence over such second figure", effective with respect to remuneration paid or received, and taxable years beginning, after 1977.

## SEC. 224.

(f)

(2) In making the redetermination required by paragraph (1), the individual's average current earnings (as defined in subsection (a)) shall be deemed to be the product of his average current earnings as initially determined under subsection (a) and the ratio of (i) the average of the taxable wages of all persons for whom taxable wages were reported to the Secretary for the first calendar quarter of the calendar year before the calendar year in which such redetermination is made, to (ii) the average of the taxable wages of such persons reported to the Secretary for the first calendar quarter of the taxable year before the calendar year in which the reduction was first computed (but not counting any reduction made in benefits for a previous period of disability). Any amount determined under the preceding sentence which is not a multiple of \$1 shall be reduced to the next lower multiple of \$1.

## SEC. 230.

(b)

(1) the contribution and benefit base which was in effect with respect to remuneration paid in (and taxable years beginning in) the calendar year in which the determination under subsection (a) with respect to such particular calendar year was made, and

(2) the ratio of (A) the average of the wages of all employees as reported to the Secretary of the Treasury for the calendar year preceding the calendar year in which the determination under subsection (a) with respect to such particular calendar year was made to (B) the average of the wages of all employees as reported to the Secretary of the Treasury for the calendar year 1973 or, if later, the calendar year preceding the most recent calendar year in which an increase in the contribution and benefit base was enacted or a determination resulting in such an increase was made under subsection (a),

## SEC. 1839.

(c)

(3)

(B) the monthly premium rate most recently promulgated by the Secretary under this paragraph or, in the case of the determination made in December 1971, such rate promulgated under subsection (b)(2) multiplied by the ratio of (i) the amount in column IV of the table which, by reason of the law in effect at the time the promulgation is made, will be in effect as of May 1, next following such determination appears (or is deemed to appear) in section 215(a) on the line which includes the figure "750" in column III of such table to (ii) the amount in column IV of the table which appeared (or was deemed to appear) in section 215(a) on the line which included the figure "750" in column III as of May 1, of the year in which such determination is made.

---

## SUPERSEDED PROVISIONS—SOCIAL SECURITY ACT

337 03/86

43 FR 20867

209

**Provision Deemed to be in Social Security Act as in Effect Prior to  
May 15, 1978 (43 Federal Register 20867)**

SEC. 215.

(a)

**TABLE FOR DETERMINING PRIMARY INSURANCE AMOUNT AND MAXIMUM FAMILY BENEFITS BEGINNING JUNE 1977<sup>1</sup>**

I (Primary insurance benefit under 1939 Act, as modified)		II (Primary insurance amount effective for June 1976)	III (Average monthly wage)		IV (Primary insurance amount)	V (Maximum family benefits)
If an individual's primary insurance benefit (as determined under subsec. (d)) is—		Or his primary insurance amount (as determined under subsec. (c)) is—	Or his average monthly wage (as determined under subsec. (b)) is—		The amount referred to in the preceding paragraphs of this subsection shall be—	And the maximum amount of benefits payable (as provided in sec. 203(a)) on the basis of his wages and self-employment income shall be—
At least—	But not more than—		At least—	But not more than—		
\$16.21	\$16.20	\$107.90		\$76	\$114.30	\$171.50
16.85	16.84	109.60	\$77	78	116.10	174.20
17.61	17.60	112.10	79	80	118.80	178.80
18.41	18.40	114.20	81	81	121.00	181.60
19.25	19.24	116.20	82	83	123.10	184.70
20.01	20.00	118.70	84	85	125.80	188.70
20.65	20.64	120.90	86	87	128.10	192.20
21.29	21.28	122.80	88	89	130.10	195.20
21.89	21.88	125.30	90	90	132.70	199.10
22.29	22.28	127.40	91	92	135.00	202.50
22.69	22.68	129.50	93	94	137.20	205.80
23.09	23.08	131.60	95	96	139.40	209.10
23.45	23.44	134.00	97	97	142.00	213.00
23.77	23.76	136.20	98	99	144.30	216.50
24.21	24.20	138.90	100	101	147.10	220.70
24.61	24.60	140.80	102	102	149.20	223.90
25.01	25.00	143.20	103	104	151.70	227.60
25.49	25.48	145.80	105	106	154.50	231.80
25.93	25.92	148.20	107	107	157.00	235.50
26.41	26.40	150.50	108	109	159.40	239.20
26.95	26.94	152.80	110	113	161.90	242.90
27.47	27.46	155.00	114	118	164.20	246.30
28.01	28.00	157.40	119	122	166.70	250.20
28.69	28.68	159.80	123	127	169.30	254.00
29.26	29.25	162.20	128	132	171.80	257.80
29.69	29.68	164.40	133	136	174.10	261.30
30.37	30.36	166.60	137	141	176.50	264.80
30.93	30.92	169.10	142	146	179.10	268.70
31.37	31.36	171.50	147	150	181.70	272.60
32.01	32.00	173.60	151	155	183.90	275.90
32.61	32.60	176.10	156	160	186.50	279.80
33.21	33.20	178.40	161	164	189.00	283.50
33.89	33.88	180.70	165	169	191.40	287.10
34.51	34.50	183.10	170	174	194.00	291.00
35.01	35.00	185.30	175	178	196.30	294.50
	35.80	187.80	179	183	198.90	298.50



I (Primary insurance benefit under 1939 Act, as modified)		II (Primary insurance amount effective for June 1976)	III (Average monthly wage)		IV (Primary insurance amount)	V (Maximum family benefits)
If an individual's primary insurance benefit (as determined under subsec. (d)) is—		Or his primary insurance amount (as determined under subsec. (c)) is—	Or his average monthly wage (as determined under subsec. (b)) is—		The amount referred to in the preceding paragraphs of this subsection shall be—	And the maximum amount of benefits payable (as provided in sec. 203(a)) on the basis of his wages and self-employment income shall be—
At least—	But not more than—		At least—	But not more than—		
35.81	36.40	190.00	184	188	201.30	302.00
36.41	37.08	192.50	189	193	203.90	306.10
37.09	37.60	194.90	194	197	206.40	309.70
37.61	38.20	197.10	198	202	208.80	313.20
38.21	39.12	199.70	203	207	211.50	317.30
39.13	39.68	202.00	208	211	214.00	321.00
39.69	40.33	203.90	212	216	216.00	324.00
40.34	41.12	206.50	217	221	218.70	328.10
41.13	41.76	208.80	222	225	221.20	331.80
41.77	42.44	211.40	226	230	223.90	335.90
42.45	43.20	213.60	231	235	226.30	339.50
43.21	43.76	216.30	236	239	229.10	343.70
43.77	44.44	218.30	240	244	231.20	348.40
44.45	44.88	220.40	245	249	233.50	355.60
44.89	45.60	223.20	250	253	236.40	361.40
		225.40	254	258	238.70	368.50
		227.30	259	263	240.80	375.50
		230.10	264	267	243.70	381.20
		232.30	268	272	246.10	388.40
		234.80	273	277	248.70	395.40
		237.00	278	281	251.00	401.10
		239.30	282	286	253.50	408.30
		241.90	287	291	256.20	415.50
		243.90	292	295	258.30	421.10
		246.50	296	300	261.10	428.20
		248.80	301	305	263.50	435.40
		250.90	306	309	265.80	441.10
		253.50	310	314	268.50	448.20
		255.60	315	319	270.70	455.40
		257.90	320	323	273.20	461.10
		260.40	324	328	275.80	468.20
		262.60	329	333	278.10	475.30
		265.30	334	337	281.00	481.20
		267.20	338	342	283.00	488.10
		269.60	343	347	285.60	495.30
		272.20	348	351	288.30	501.00
		274.30	352	356	290.50	508.10
		276.90	357	361	293.30	515.30
		279.10	362	365	295.60	521.00
		281.30	366	370	297.90	528.10
		283.80	371	375	300.60	535.10
		286.20	376	379	303.10	541.10
		288.60	380	384	305.70	548.20
		290.70	385	389	307.90	555.20
		293.00	390	393	310.30	560.90
		295.50	394	398	313.00	568.10
		297.80	399	403	315.40	575.30

## SUPERSEDED PROVISIONS—SOCIAL SECURITY ACT

337 03/86

43 FR 20867

211

I (Primary insurance benefit under 1939 Act, as modified)		II (Primary insurance amount ef- fective for June 1976)	III (Average monthly wage)		IV (Primary insurance amount)	V (Maximum family ben- efits)
If an individual's primary insurance benefit (as deter- mined under subsec. (d)) is—		Or his pri- mary insur- ance amount (as determined under sub- sec. (c)) is—	Or his average monthly wage (as de- termined under sub- sec. (b)) is—		The amount referred to in the pre- ceding para- graphs of this sub- section shall be—	And the maximum amount of benefits payable (as provided in sec. 203(a)) on the basis of his wages and self- employ- ment in- come shall be—
At least—	But not more than—		At least—	But not more than—		
		300.40	404	407	318.20	580.80
		302.30	408	412	320.20	588.00
		304.50	413	417	322.50	595.10
		306.70	418	421	324.80	600.80
		309.10	422	426	327.40	607.90
		311.20	427	431	329.60	615.10
		313.10	432	436	331.60	622.20
		315.70	437	440	334.40	625.00
		317.70	441	445	336.50	628.80
		319.80	446	450	338.70	632.30
		322.20	451	454	341.30	635.00
		324.30	455	459	343.50	638.50
		326.50	460	464	345.80	642.00
		328.50	465	468	347.90	645.10
		331.10	469	473	350.70	648.60
		332.90	474	478	352.60	652.20
		335.10	479	482	354.90	655.10
		337.40	483	487	357.40	658.70
		339.60	488	492	359.70	662.30
		341.70	493	496	361.90	665.10
		344.10	497	501	364.50	668.60
		346.10	502	506	366.60	672.10
		348.30	507	510	368.90	675.10
		350.40	511	515	371.10	678.60
		352.80	516	520	373.70	682.30
		354.80	521	524	375.80	684.90
		357.00	525	529	378.10	688.60
		359.50	530	534	380.80	692.10
		361.40	535	538	382.80	695.00
		363.60	539	543	385.10	698.60
		366.00	544	548	387.60	702.10
		368.10	549	553	389.90	705.70
		370.20	554	556	392.10	707.80
		371.90	557	560	393.90	710.70
		374.00	561	563	396.10	712.90
		376.00	564	567	398.20	715.70
		378.00	568	570	400.40	717.80
		379.80	571	574	402.30	720.60
		381.80	575	577	404.40	722.90
		383.50	578	581	406.20	725.60
		385.60	582	584	408.40	727.80
		387.30	585	588	410.20	730.70
		389.60	589	591	412.60	732.80
		391.50	592	595	414.60	735.60
		393.40	596	598	416.70	737.60
		395.30	599	602	418.70	740.70
		397.20	603	605	420.70	742.80

## SUPERSEDED PROVISIONS—SOCIAL SECURITY ACT

212 43 FR 20867

337 03/86

I (Primary insurance benefit under 1939 Act, as modified)		II (Primary insurance amount ef- fective for June 1976)	III (Average monthly wage)		IV (Primary insurance amount)	V (Maximum family ben- efits)
If an individual's primary insurance benefit (as deter- mined under subsec. (d)) is—		Or his pri- mary insur- ance amount (as determined under sub- sec. (c)) is—	Or his average monthly wage (as de- termined under sub- sec. (b)) is—		The amount referred to in the pre- ceding para- graphs of this sub- section shall be—	And the maximum amount of benefits payable (as provided in sec. 203(a)) on the basis of his wages and self- employ- ment in- come shall be—
At least—	But not more than—		At least—	But not more than—		
		399.20	606	609	422.80	745.50
		401.20	610	612	424.90	747.80
		403.10	613	616	426.90	750.70
		405.00	617	620	428.90	753.50
		406.90	621	623	431.00	755.60
		408.80	624	627	433.00	758.50
		410.80	628	630	435.10	761.20
		412.70	631	634	437.10	764.90
		414.70	635	637	439.20	768.50
		416.80	638	641	441.40	772.20
		418.50	642	644	443.20	775.60
		420.50	645	648	445.40	779.40
		422.40	649	652	447.40	782.80
		423.60	653	656	448.60	785.00
		424.80	657	660	449.90	787.20
		426.30	661	665	451.50	790.10
		427.80	666	670	453.10	792.90
		429.40	671	675	454.80	795.60
		430.90	676	680	456.40	798.50
		432.40	681	685	458.00	801.40
		434.10	686	690	459.80	804.10
		435.50	691	695	461.20	807.10
		437.00	696	700	462.80	809.90
		438.60	701	705	464.50	812.70
		440.10	706	710	466.10	815.50
		441.60	711	715	467.70	818.30
		443.20	716	720	469.40	821.20
		444.70	721	725	471.00	824.00
		446.20	726	730	472.60	826.90
		447.70	731	735	474.20	829.80
		449.30	736	740	475.90	832.50
		450.80	741	745	477.40	835.50
		452.20	746	750	478.90	838.20
		453.60	751	755	480.40	840.70
		454.90	756	760	481.80	843.00
		456.20	761	765	483.20	845.40
		457.50	766	770	484.50	847.80
		458.70	771	775	485.80	850.10
		460.00	776	780	487.20	852.40
		461.30	781	785	488.60	854.80
		462.50	786	790	489.80	857.10
		463.70	791	795	491.10	859.50
		465.00	796	800	492.50	861.90
		466.40	801	805	494.00	864.30
		467.70	806	810	495.30	866.60
		469.00	811	815	496.70	869.10
		470.20	816	820	498.00	871.30



## SUPERSEDED PROVISIONS—SOCIAL SECURITY ACT

337 03/86

43 FR 20867

213

I (Primary insurance benefit under 1939 Act, as modified)		II (Primary insurance amount effective for June 1976)	III (Average monthly wage)		IV (Primary insurance amount)	V (Maximum family benefits)
If an individual's primary insurance benefit (as determined under subsec. (d)) is—		Or his primary insurance amount (as determined under subsec. (c)) is—	Or his average monthly wage (as determined under subsec. (b)) is—		The amount referred to in the preceding paragraphs of this subsection shall be—	And the maximum amount of benefits payable (as provided in sec. 203(a)) on the basis of his wages and self-employment income shall be—
At least—	But not more than—		At least—	But not more than—		
		471.50	821	825	499.40	873.80
		472.80	826	830	500.70	876.10
		474.00	831	835	502.00	878.50
		475.20	836	840	503.30	880.80
		476.50	841	845	504.70	883.30
		477.80	846	850	506.00	885.40
		479.20	851	855	507.50	887.90
		480.40	856	860	508.80	890.20
		481.70	861	865	510.20	892.60
		483.00	866	870	511.50	895.00
		484.30	871	875	512.90	897.30
		485.40	876	880	514.10	899.70
		486.70	881	885	515.50	902.10
		488.00	886	890	516.80	904.40
		489.30	891	895	518.20	907.00
		490.60	896	900	519.60	909.20
		491.90	901	905	521.00	911.60
		493.20	906	910	522.30	914.00
		494.50	911	915	523.70	916.40
		495.80	916	920	525.10	918.50
		496.90	921	925	526.30	921.10
		498.20	926	930	527.60	923.30
		499.50	931	935	529.00	925.70
		500.80	936	940	530.40	928.10
		502.00	941	945	531.70	930.50
		503.30	946	950	533.00	932.80
		504.70	951	955	534.50	935.30
		506.00	956	960	535.90	937.60
		507.30	961	965	537.30	939.90
		508.40	966	970	538.40	942.30
		509.70	971	975	539.80	944.70
		511.00	976	980	541.20	946.90
		512.30	981	985	542.60	949.30
		513.50	986	990	543.80	951.70
		514.80	991	995	545.20	954.10
		516.10	996	1000	546.60	956.40
		517.20	1001	1005	547.80	958.40
		518.30	1006	1010	548.90	960.70
		519.50	1011	1015	550.20	962.70
		520.70	1016	1020	551.50	965.00
		521.80	1021	1025	552.60	967.00
		522.90	1026	1030	553.80	969.20
		524.10	1031	1035	555.10	971.30
		525.20	1036	1040	556.20	973.40
		526.40	1041	1045	557.50	975.60
		527.60	1046	1050	558.80	977.70
		528.60	1051	1055	559.80	979.70

## SUPERSEDED PROVISIONS—SOCIAL SECURITY ACT

214 43 FR 20867

337 03/86

I (Primary insurance benefit under 1939 Act, as modified)		II (Primary insurance amount ef- fective for June 1976)	III (Average monthly wage)		IV (Primary insurance amount)	V (Maximum family ben- efits)
If an individual's primary insurance benefit (as deter- mined under subsec. (d)) is—		Or his pri- mary insur- ance amount (as determined under sub- sec. (c)) is—	Or his average monthly wage (as de- termined under sub- sec. (b)) is—		The amount referred to in the pre- ceding para- graphs of this sub- section shall be—	And the maximum amount of benefits payable (as provided in sec. 203(a)) on the basis of his wages and self- employ- ment in- come shall be—
At least—	But not more than—		At least—	But not more than—		
		529.80	1056	1060	561.10	982.00
		531.00	1061	1065	562.40	984.00
		532.20	1066	1070	563.60	986.30
		533.30	1071	1075	564.80	988.30
		534.40	1076	1080	566.00	990.50
		535.60	1081	1085	567.30	992.50
		536.70	1086	1090	568.40	994.70
		537.90	1091	1095	569.70	996.90
		539.10	1096	1100	571.00	999.00
		540.10	1101	1105	572.00	1001.00
		541.30	1106	1110	573.30	1003.20
		542.50	1111	1115	574.60	1005.30
		543.60	1116	1120	575.70	1007.60
		544.80	1121	1125	577.00	1009.60
		545.90	1126	1130	578.20	1011.80
		547.10	1131	1135	579.40	1013.80
		548.20	1136	1140	580.60	1016.10
		549.40	1141	1145	581.90	1018.20
		550.60	1146	1150	583.10	1020.30
		551.60	1151	1155	584.20	1022.30
		552.80	1156	1160	585.50	1024.50
		554.00	1161	1165	586.70	1026.60
		555.10	1166	1170	587.90	1028.90
		556.30	1171	1175	589.20	1030.90
		557.40	1176	1180	590.30	1033.00
		558.40	1181	1185	591.40	1034.90
		559.50	1186	1190	592.60	1036.90
		560.60	1191	1195	593.70	1038.90
		561.60	1196	1200	594.80	1040.90
		562.70	1201	1205	595.90	1042.80
		563.80	1206	1210	597.10	1044.90
		564.80	1211	1215	598.20	1046.80
		565.90	1216	1220	599.30	1048.80
		566.90	1221	1225	600.40	1050.70
		568.00	1226	1230	601.60	1052.70
		569.10	1231	1235	602.70	1054.60
		570.10	1236	1240	603.80	1056.70
		571.20	1241	1245	605.00	1058.60
		572.30	1246	1250	606.10	1060.60
		573.30	1251	1255	607.20	1062.50
		574.40	1256	1260	608.30	1064.60
		575.50	1261	1265	609.50	1066.50
		576.50	1266	1270	610.60	1068.50
		577.60	1271	1275	611.70	1070.40
		578.60	1276	1280	612.80	1072.40
		579.60	1281	1285	613.80	1074.20
		580.60	1286	1290	614.90	1076.10

## SUPERSEDED PROVISIONS—SOCIAL SECURITY ACT

337 03/86

43 FR 20867

215

I (Primary insurance benefit under 1939 Act, as modified)		II (Primary insurance amount effective for June 1976)	III (Average monthly wage)		IV (Primary insurance amount)	V (Maximum family benefits)
If an individual's primary insurance benefit (as determined under subsec. (d)) is—		Or his primary insurance amount (as determined under subsec. (c)) is—	Or his average monthly wage (as determined under subsec. (b)) is—		The amount referred to in the preceding paragraphs of this subsection shall be—	And the maximum amount of benefits payable (as provided in sec. 203(a)) on the basis of his wages and self-employment income shall be—
At least—	But not more than—		At least—	But not more than—		
		581.60	1291	1295	616.00	1077.90
		582.60	1296	1300	617.00	1079.80
		583.60	1301	1305	618.10	1081.60
		584.60	1306	1310	619.10	1083.50
		585.60	1311	1315	620.20	1085.30
		586.60	1316	1320	621.30	1087.20
		587.60	1321	1325	622.30	1089.00
		588.60	1326	1330	623.40	1090.90
		589.60	1331	1335	624.40	1092.70
		590.60	1336	1340	625.50	1094.60
		591.60	1341	1345	626.60	1096.40
		592.60	1346	1350	627.60	1098.30
		593.60	1351	1355	628.70	1100.10
		594.60	1356	1360	629.70	1102.00
		595.60	1361	1365	630.80	1103.80
		596.60	1366	1370	631.80	1105.80
		597.60	1371	1375	632.90	1107.60

<sup>1</sup>This revised table of benefits was published in the Federal Register on May 12, 1977 (42 FR 24210), as required by P.L. 93-66, §203(f), which reads as follows:

"(f) Effective June 1, 1974, the Secretary of Health, Education, and Welfare, shall prescribe and publish in the Federal Register such modifications and extensions in the table contained in section 215(a) of the Social Security Act (which shall be determined in the same manner as the revisions in such table provided for under section 215(i)(2)(D) of such Act) as may be necessary to reflect the amendments made by this section; and such modified and extended table shall be deemed to be the table appearing in such section 215(a)."

This table was effective through May 1978. For the table effective beginning June 1978, see p. 218.

<sup>2</sup>The Federal Register of May 23, 1977 (42 FR 26250) struck out the duplicate line which began with "31.37".

<sup>3</sup>The Federal Register of May 23, 1977 (42 FR 26250) struck out "452.40" and substituted "852.40".

<sup>4</sup>The Federal Register of May 23, 1977 (42 FR 26250) struck out "514.00" and substituted "914.00".



**Provisions of the Social Security Act as in Effect Prior to  
P.L. 95-292, Approved June 13, 1978 (92 Stat. 307)  
[Social Security—End Stage Renal Disease Program]**

**SEC. 226.**

(e) Notwithstanding the foregoing provisions of this section, every individual who—

(1) has not attained the age of 65;

(2)(A) is fully or currently insured (as such terms are defined in section 214 of this Act) or would be fully or currently insured if his service as an employee (as defined in the Railroad Retirement Act of 1974) after December 31, 1936, were included in the term “employment” as defined in this Act, or (B) is entitled to monthly insurance benefits under title II of this Act or an annuity under the Railroad Retirement Act of 1974, or (C) is the spouse or dependent child (as defined in regulations) of an individual who is fully or currently insured or would be fully or currently insured if his service as an employee (as defined in the Railroad Retirement Act of 1974) after December 31, 1936, were included in the term “employment” as defined in this Act, or (D) is the spouse or dependent child (as defined in regulations) of an individual entitled to monthly insurance benefits under title II of this Act or an annuity under the Railroad Retirement Act of 1974; and

(3) is medically determined to have chronic renal disease and who requires hemodialysis or renal transplantation for such disease;

shall be deemed to be disabled for purposes of coverage under parts A and B of Medicare subject to the deductible, premium, and copayment provisions of title XVIII.

(f) Medicare eligibility on the basis of chronic kidney failure shall begin with the third month after the month in which a course of renal dialysis is initiated and would end with the twelfth month after the month in which the person has a renal transplant or such course of dialysis is terminated.

(g) The Secretary is authorized to limit reimbursement under Medicare for kidney transplant and dialysis to kidney disease treatment centers which meet such requirements as he may by regulation prescribe: *Provided*, That such requirements must include at least requirements for a minimal utilization rate for covered procedures and for a medical review board to screen the appropriateness of patients for the proposed treatment procedures.

**Provision of the Social Security Act as in Effect Prior to  
P.L. 95-598, Approved November 6, 1978 (92 Stat. 2549)  
[Title 11, U.S. Code—Bankruptcy—Child Support]**

**SEC. 456.**

(b) A debt which is a child support obligation assigned to a State under section 402(a)(26) is not released by a discharge in bankruptcy under the Bankruptcy Act.

**Provision Deemed to be in Social Security Act, as in Effect Prior to  
November 16, 1978 (43 Federal Register 53504)**

**【Cost-of-Living Increase; Extension】**

SEC. 215.

(a)

**TABLE FOR DETERMINING PRIMARY INSURANCE AMOUNT AND MAXIMUM FAMILY  
BENEFITS BEGINNING JANUARY 1978<sup>1</sup>**

I (Primary insurance benefit under 1939 Act, as modified)		II (Primary insurance amount ef- fective for June 1976)	III (Average monthly wage)		IV (Primary insurance amount)	V (Maximum family ben- efits)
If an individual's primary insurance benefit (as deter- mined under subsec. (d)) is—		Or his pri- mary insur- ance amount (as determined under sub- sec. (c)) is—	Or his average monthly wage (as de- termined under sub- sec. (b)) is—		The amount referred to in the pre- ceding para- graphs of this sub- section shall be—	And the maximum amount of benefits payable (as provided in sec. 203(a) on the basis of his wages and self- employ- ment in- come shall be—
At least—	But not more than—		At least—	But not more than—		
			\$1,376	\$1,380	\$633.90	\$1,109.40
			<sup>2</sup> 1,381	1,385	634.90	1,111.10
			1,386	1,390	635.90	1,112.90
			1,391	1,395	636.90	1,114.60
			1,396	1,400	637.90	1,116.40
			1,401	1,405	638.90	1,118.10
			1,406	1,410	639.90	1,119.90
			1,411	1,415	640.90	1,121.60
			1,416	1,420	641.90	1,123.40
			1,421	1,425	642.90	1,125.10
			1,426	1,430	643.90	1,126.90
			1,431	1,435	644.90	1,128.60
			1,436	1,440	645.90	1,130.40
			1,441	1,445	646.90	1,132.10
			1,446	1,450	647.90	1,133.90
			1,451	1,455	648.90	1,135.60
			1,456	1,460	649.90	1,137.40
			1,461	1,465	650.90	1,139.10
			1,466	1,470	651.90	1,140.90
			1,471	1,475	652.90	1,142.60

<sup>1</sup>This extension was published at 42 FR 57754, November 4, 1977, and corrected at 43 FR 11859, March 22, 1978. This data was prepared and published as required by Social Security Act §215(a)(5) and §215(i)(2)(D).

<sup>2</sup>The Federal Register of March 22, 1978 (43 FR 11859) struck out "1,831" and substituted "1,381".

**Provision Deemed to be in Social Security Act, as in Effect Prior to  
May 15, 1979 (44 Federal Register 28423)  
[Cost-of-Living Increase]**

SEC. 215.  
(a)

**TABLE FOR DETERMINING PRIMARY INSURANCE AMOUNT AND MAXIMUM FAMILY  
BENEFITS BEGINNING JUNE 1978<sup>1</sup>**

I (Primary insurance benefit under 1939 Act, as modified)		II (Primary insurance amount ef- fective for June 1977)	III (Average monthly wage)		IV (Primary insurance amount)	V (Maximum family ben- efits)
If an individual's primary insurance benefit (as deter- mined under subsec. (d)) is—		Or his pri- mary insur- ance amount (as determined under sub- sec. (c)) is—	Or his average monthly wage (as de- termined under sub- sec. (b)) is—		The amount referred to in the pre- ceding para- graphs of this sub- section shall be—	And the maximum amount of benefits payable (as provided in sec. 203(a)) on the basis of his wages and self- employ- ment in- come shall be—
At least—	But not more than—		At least—	But not more than—		
	\$16.20	\$114.30		\$76	\$121.80	\$182.70
\$16.21	16.84	116.10	\$77	78	123.70	185.60
16.85	17.60	118.80	79	80	126.60	189.90
17.61	18.40	121.00	81	81	128.90	193.50
18.41	19.24	123.00	82	83	131.20	196.80
19.25	20.00	125.80	84	85	134.00	201.00
20.01	20.64	128.10	86	87	136.50	204.80
20.65	21.28	130.10	88	89	138.60	207.90
21.29	21.88	132.70	90	90	141.40	212.10
21.89	22.28	135.00	91	92	143.80	215.70
22.29	22.68	137.20	93	94	146.20	219.30
22.69	23.08	139.40	95	96	148.50	222.80
23.09	23.44	142.00	97	97	151.30	227.00
23.45	23.76	144.30	98	99	153.70	230.60
23.77	24.20	147.10	100	101	156.70	235.10
24.21	24.60	149.20	102	102	158.90	238.50
24.61	25.00	151.70	103	104	161.60	242.40
25.01	25.48	154.50	105	106	164.60	246.90
25.49	25.92	157.00	107	107	167.30	251.00
25.93	26.40	159.40	108	109	169.80	254.80
26.41	26.94	161.90	110	113	172.50	258.80
26.95	27.46	164.20	114	118	174.90	262.40
27.47	28.00	166.70	119	122	177.60	266.50
28.01	28.68	169.30	123	127	180.40	270.60
28.69	29.25	171.80	128	132	183.00	274.60
29.26	29.68	174.10	133	136	185.50	278.30
29.69	30.36	176.50	137	141	188.00	282.10
30.37	30.92	179.10	142	146	190.80	286.20
30.93	31.36	181.70	147	150	193.60	290.40
31.37	32.00	183.90	151	155	195.90	293.90
32.01	32.60	186.50	156	160	198.70	298.10
32.61	33.20	189.00	161	164	201.30	302.00
33.21	33.88	191.40	165	169	203.90	305.90
33.89	34.50	194.00	170	174	206.70	310.10



## SUPERSEDED PROVISIONS—SOCIAL SECURITY ACT

337 03/86

44 FR 28423

219

I (Primary insurance benefit under 1939 Act, as modified)		II (Primary insurance amount ef- fective for June 1977)	III (Average monthly wage)		IV (Primary insurance amount)	V (Maximum family ben- efits)
If an individual's primary insurance benefit (as deter- mined under subsec. (d)) is—		Or his pri- mary insur- ance amount (as determined under sub- sec. (c)) is—	Or his average monthly wage (as de- termined under sub- sec. (b)) is—		The amount referred to in the pre- ceding para- graphs of this sub- section shall be—	And the maximum amount of benefits payable (as provided in sec. 203(a)) on the basis of his wages and self- employ- ment in- come shall be—
At least—	But not more than—		At least—	But not more than—		
34.51	35.00	196.30	175	178	209.10	313.70
35.01	35.80	198.90	179	183	211.90	318.00
35.81	36.40	201.30	184	188	214.40	321.70
36.41	37.08	203.90	189	193	217.20	326.00
37.09	37.60	206.40	194	197	219.90	329.90
37.61	38.20	208.80	198	202	222.40	333.60
38.21	39.12	211.50	203	207	225.30	338.00
39.13	39.68	214.00	208	211	228.00	342.00
39.69	40.33	216.00	212	216	230.10	345.20
40.34	41.12	218.70	217	221	233.00	349.50
41.13	41.76	221.20	222	225	235.60	353.40
41.77	42.44	223.90	226	230	238.50	357.80
42.45	43.20	226.30	231	235	241.10	361.70
43.21	43.76	229.10	236	239	244.00	366.10
43.77	44.44	231.20	240	244	246.30	371.10
44.45	44.88	233.50	245	249	248.70	378.80
44.89	45.60	236.40	250	253	251.80	384.90
		238.70	254	258	254.30	392.50
		240.80	259	263	256.50	400.00
		243.70	264	267	259.60	406.00
		246.10	268	272	262.10	413.70
		248.70	273	277	264.90	421.20
		251.00	278	281	267.40	427.20
		253.50	282	286	270.00	434.90
		256.20	287	291	272.90	442.60
		258.30	292	295	275.10	448.50
		261.10	296	300	278.10	456.10
		263.50	301	305	280.70	463.80
		265.80	306	309	283.10	469.80
		268.50	310	314	286.00	477.40
		270.70	315	319	288.30	485.10
		273.20	320	323	291.00	491.10
		275.80	324	328	293.80	498.70
		278.10	329	333	296.20	506.20
		281.00	334	337	299.30	512.50
		283.00	338	342	301.40	519.90
		285.60	343	347	304.20	527.50
		288.30	348	351	307.10	533.60
		290.50	352	356	309.40	541.20
		293.30	357	361	312.40	548.80
		295.60	362	365	314.90	554.90
		297.90	366	370	317.30	562.50
		300.60	371	375	320.20	569.90
		303.10	376	379	322.90	576.30
		305.70	380	384	325.60	583.90
		307.90	385	389	328.00	591.30
		310.30	390	393	330.50	597.40

## SUPERSEDED PROVISIONS—SOCIAL SECURITY ACT

220 44 FR 28423

337 03/86

I (Primary insurance benefit under 1939 Act, as modified)		II (Primary insurance amount effective for June 1977)	III (Average monthly wage)		IV (Primary insurance amount)	V (Maximum family benefits)
If an individual's primary insurance benefit (as determined under subsec. (d)) is—		Or his primary insurance amount (as determined under subsec. (c)) is—	Or his average monthly wage (as determined under subsec. (b)) is—		The amount referred to in the preceding paragraphs of this subsection shall be—	And the maximum amount of benefits payable (as provided in sec. 203(a)) on the basis of his wages and self-employment income shall be—
At least—	But not more than—		At least—	But not more than—		
		313.00	394	398	333.40	605.10
		315.40	399	403	336.00	612.70
		318.20	404	407	338.90	618.60
		320.20	408	412	341.10	626.30
		322.50	413	417	343.50	633.80
		324.80	418	421	346.00	639.90
		327.40	422	426	348.70	647.50
		329.60	427	431	351.10	655.10
		331.60	432	436	353.20	662.70
		334.40	437	440	356.20	665.70
		336.50	441	445	358.40	669.70
		338.70	446	450	360.80	673.40
		341.30	451	454	363.50	676.30
		343.50	455	459	365.90	680.10
		345.80	460	464	368.30	683.80
		347.90	465	468	370.60	687.10
		350.70	469	473	373.50	690.80
		352.60	474	478	375.60	694.60
		354.90	479	482	378.00	697.70
		357.40	483	487	380.70	701.60
		359.70	488	492	383.10	705.40
		361.90	493	496	385.50	708.40
		364.50	497	501	388.20	712.10
		366.60	502	506	390.50	715.80
		368.90	507	510	392.90	719.00
		371.10	511	515	395.30	722.80
		373.70	516	520	398.00	726.70
		375.80	521	524	400.30	729.50
		378.10	525	529	402.70	733.40
		380.80	530	534	405.60	737.10
		382.80	535	538	407.70	740.20
		385.10	539	543	410.20	744.10
		387.60	544	548	412.80	747.80
		389.90	549	553	415.30	751.60
		392.10	554	556	417.60	753.90
		393.90	557	560	419.60	756.90
		396.10	561	563	421.90	759.30
		398.20	564	567	424.10	762.30
		400.40	568	570	426.50	764.50
		402.30	571	574	428.50	767.50
		404.40	575	577	430.70	769.90
		406.20	578	581	432.70	772.80
		408.40	582	584	435.00	775.20
		410.20	585	588	436.90	778.20
		412.60	589	591	439.50	780.50
		414.60	592	595	441.60	783.50
		416.70	596	598	443.80	785.60

## SUPERSEDED PROVISIONS—SOCIAL SECURITY ACT

337 03/86

44 FR 28423

221

I (Primary insurance benefit under 1939 Act, as modified)		II (Primary insurance amount ef- fective for June 1977)	III (Average monthly wage)		IV (Primary insurance amount)	V (Maximum family ben- efits)
If an individual's primary insurance benefit (as deter- mined under subsec. (d)) is—		Or his pri- mary insur- ance amount (as determined under sub- sec. (c)) is—	Or his average monthly wage (as de- termined under sub- sec. (b)) is—		The amount referred to in the pre- ceding para- graphs of this sub- section shall be—	And the maximum amount of benefits payable (as provided in sec. 203(a)) on the basis of his wages and self- employ- ment in- come shall be—
At least—	But not more than—		At least—	But not more than—		
		418.70	599	602	446.00	788.90
		420.70	603	605	448.10	791.10
		422.80	606	609	450.30	794.00
		424.90	610	612	452.60	796.50
		426.90	613	616	454.70	799.50
		428.90	617	620	456.80	802.50
		431.00	621	623	459.10	804.80
		433.00	624	627	461.20	807.90
		435.10	628	630	463.40	810.70
		437.10	631	634	465.60	814.70
		439.20	635	637	467.80	818.50
		441.40	638	641	470.10	822.40
		443.20	642	644	472.10	826.10
		445.40	645	648	474.40	830.10
		447.40	649	652	476.50	833.70
		448.60	653	656	477.80	836.10
		449.90	657	660	479.20	838.40
		451.50	661	665	480.90	841.50
		453.10	666	670	482.60	844.50
		454.80	671	675	484.40	847.40
		456.40	676	680	486.10	850.50
		458.00	681	685	487.80	853.50
		459.80	686	690	489.70	856.40
		461.20	691	695	491.20	859.60
		462.80	696	700	492.90	862.60
		464.50	701	705	494.70	865.60
		466.10	706	710	496.40	868.60
		467.70	711	715	498.20	871.50
		469.40	716	720	500.00	874.60
		471.00	721	725	501.70	877.60
		472.60	726	730	503.40	880.70
		474.20	731	735	505.10	883.80
		475.90	736	740	506.90	886.70
		477.40	741	745	508.50	889.90
		478.90	746	750	510.10	892.70
		480.40	751	755	511.70	895.40
		481.80	756	760	513.20	897.80
		483.20	761	765	514.70	900.40
		484.50	766	770	516.00	903.00
		485.80	771	775	517.40	905.40
		487.20	776	780	518.90	907.90
		488.60	781	785	520.40	910.40
		489.80	786	790	521.70	912.90
		491.10	791	795	523.10	915.40
		492.50	796	800	524.60	918.00
		494.00	801	805	526.20	920.50
		495.30	806	810	527.50	923.00



## SUPERSEDED PROVISIONS—SOCIAL SECURITY ACT

222 44 FR 28423

337 03/86

I (Primary insurance benefit under 1939 Act, as modified)		II (Primary insurance amount ef- fective for June 1977)	III (Average monthly wage)		IV (Primary insurance amount)	V (Maximum family ben- efits)
If an individual's primary insurance benefit (as deter- mined under subsec. (d)) is—		Or his pri- mary insur- ance amount (as determined under sub- sec. (c)) is—	Or his average monthly wage (as de- termined under sub- sec. (b)) is—		The amount referred to in the pre- ceding para- graphs of this sub- section shall be—	And the maximum amount of benefits payable (as provided in sec. 203(a)) on the basis of his wages and self- employ- ment in- come shall be—
At least—	But not more than—		At least—	But not more than—		
		496.70	811	815	529.00	925.60
		498.00	816	820	530.40	928.00
		499.40	821	825	531.90	930.60
		500.70	826	830	533.30	933.10
		502.00	831	835	534.70	935.70
		503.30	836	840	536.10	938.10
		504.70	841	845	537.60	940.80
		506.00	846	850	538.90	943.00
		507.50	851	855	540.50	945.70
		508.80	856	860	541.90	948.10
		510.20	861	865	543.40	950.70
		511.50	866	870	544.80	953.20
		512.90	871	875	546.30	955.70
		514.10	876	880	547.60	958.20
		515.50	881	885	549.10	960.80
		516.80	886	890	550.40	963.20
		518.20	891	895	551.90	966.00
		519.60	896	900	553.40	968.30
		521.00	901	905	554.90	970.90
		522.30	906	910	556.30	973.50
		523.70	911	915	557.80	976.00
		525.10	916	920	559.30	978.30
		526.30	921	925	560.60	981.00
		527.60	926	930	561.90	983.40
		529.00	931	935	563.40	985.90
		530.40	936	940	564.90	988.50
		531.70	941	945	566.30	991.00
		533.00	946	950	567.70	998.50
		534.50	951	955	569.30	996.10
		535.90	956	960	570.80	998.60
		537.30	961	965	572.30	1001.00
		538.40	966	970	573.40	1003.60
		539.80	971	975	574.90	1006.20
		541.20	976	980	576.40	1008.50
		542.60	981	985	577.90	1011.10
		543.80	986	990	579.20	1013.60
		545.20	991	995	580.70	1016.20
		546.60	996	1000	582.20	1018.60
		547.80	1001	1005	583.50	1020.70
		548.90	1006	1010	584.60	1023.20
		550.20	1011	1015	586.00	1025.30
		551.50	1016	1020	587.40	1027.80
		552.60	1021	1025	588.60	1029.90
		553.80	1026	1030	589.80	1032.20
		555.10	1031	1035	591.20	1034.50
		556.20	1036	1040	592.40	1036.70
		557.50	1041	1045	593.80	1039.10

## SUPERSEDED PROVISIONS—SOCIAL SECURITY ACT

337 03/86

44 FR 28423

223

I (Primary insurance benefit under 1939 Act, as modified)		II (Primary insurance amount ef- fective for June 1977)	III (Average monthly wage)		IV (Primary insurance amount)	V (Maximum family ben- efits)
If an individual's primary insurance benefit (as deter- mined under subsec. (d)) is—		Or his pri- mary insur- ance amount (as determined under sub- sec. (c)) is—	Or his average monthly wage (as de- termined under sub- sec. (b)) is—		The amount referred to in the pre- ceding para- graphs of this sub- section shall be—	And the maximum amount of benefits payable (as provided in sec. 203(a)) on the basis of his wages and self- employ- ment in- come shall be—
At least—	But not more than—		At least—	But not more than—		
		558.80	1046	1050	595.20	1041.30
		559.80	1051	1055	596.20	1043.40
		561.10	1056	1060	597.60	1045.90
		562.40	1061	1065	599.00	1048.00
		563.60	1066	1070	600.30	1050.50
		564.80	1071	1075	601.60	1052.60
		566.00	1076	1080	602.80	1054.90
		567.30	1081	1085	604.20	1057.10
		568.40	1086	1090	605.40	1059.40
		569.70	1091	1095	606.80	1061.70
		571.00	1096	1100	608.20	1064.00
		572.00	1101	1105	609.20	1066.10
		573.30	1106	1110	610.60	1068.50
		574.60	1111	1115	612.00	1070.70
		575.70	1116	1120	613.20	1073.10
		577.00	1121	1125	614.60	1075.30
		578.20	1126	1130	615.80	1077.60
		579.40	1131	1135	617.10	1079.70
		580.60	1136	1140	618.40	1082.20
		581.90	1141	1145	619.80	1084.40
		583.10	1146	1150	621.10	1086.70
		584.20	1151	1155	622.20	1088.80
		585.50	1156	1160	623.60	1091.10
		586.70	1161	1165	624.90	1093.40
		587.90	1166	1170	626.20	1095.80
		589.20	1171	1175	627.50	1098.00
		590.30	1176	1180	628.70	1100.20
		591.40	1181	1185	629.90	1102.20
		592.60	1186	1190	631.20	1104.30
		593.70	1191	1195	632.30	1106.50
		594.80	1196	1200	633.50	1108.60
		595.90	1201	1205	634.70	1110.60
		597.10	1206	1210	636.00	1112.90
		598.20	1211	1215	637.10	1114.90
		599.30	1216	1220	638.30	1117.00
		600.40	1221	1225	639.50	1119.00
		601.60	1226	1230	640.80	1121.20
		602.70	1231	1235	641.90	1123.20
		603.80	1236	1240	643.10	1125.40
		605.00	1241	1245	644.40	1127.50
		606.10	1246	1250	645.50	1129.60
		607.20	1251	1255	646.70	1131.60
		608.30	1256	1260	647.90	1133.80
		609.50	1261	1265	649.20	1135.90
		610.60	1266	1270	650.30	1138.00
		611.70	1271	1275	651.50	1140.00
		612.80	1276	1280	652.70	1142.20

## SUPERSEDED PROVISIONS—SOCIAL SECURITY ACT

224 44 FR 28423.

337 03/86

I (Primary insurance benefit under 1939 Act, as modified)		II (Primary insurance amount effective for June 1977)	III (Average monthly wage)		IV (Primary insurance amount)	V (Maximum family benefits)
If an individual's primary insurance benefit (as determined under subsec. (d)) is—		Or his primary insurance amount (as determined under subsec. (c)) is—	Or his average monthly wage (as determined under subsec. (b)) is—		The amount referred to in the preceding paragraphs of this subsection shall be—	And the maximum amount of benefits payable (as provided in sec. 203(a)) on the basis of his wages and self-employment income shall be—
At least—	But not more than—		At least—	But not more than—		
		613.80	1281	1285	653.70	1144.10
		614.90	1286	1290	654.90	1146.10
		616.00	1291	1295	656.10	1148.00
		617.00	1296	1300	657.20	1150.00
		618.10	1301	1305	658.30	1152.00
		619.10	1306	1310	659.40	1154.00
		620.20	1311	1315	660.60	1155.90
		621.30	1316	1320	661.70	1157.90
		622.30	1321	1325	662.80	1159.80
		623.40	1326	1330	664.00	1161.90
		624.40	1331	1335	665.00	1163.80
		625.50	1336	1340	666.20	1165.80
		626.60	1341	1345	667.40	1167.70
		627.60	1346	1350	668.40	1169.70
		628.70	1351	1355	669.60	1171.70
		629.70	1356	1360	670.70	1173.70
		630.80	1361	1365	671.90	1175.60
		631.80	1366	1370	672.90	1177.70
		632.90	1371	1375	674.10	1179.60
		633.90	1376	1380	675.20	1181.60
		634.90	1381	1385	676.20	1183.40
		635.90	1386	1390	677.30	1185.30
		636.90	1391	1395	678.30	1187.10
		637.90	1396	1400	679.40	1189.00
		638.90	1401	1405	680.50	1190.80
		639.90	1406	1410	681.50	1192.70
		640.90	1411	1415	682.60	1194.60
		641.90	1416	1420	683.70	1196.50
		642.90	1421	1425	684.70	1198.30
		643.90	1426	1430	685.80	1200.20
		644.90	1431	1435	686.90	1202.00
		645.90	1436	1440	687.90	1203.90
		646.90	1441	1445	689.00	1205.70
		647.90	1446	1450	690.10	1207.70
		648.90	1451	1455	691.10	1209.50
		649.90	1456	1460	692.20	1211.40
		650.90	1461	1465	693.30	1213.20
		651.90	1466	1470	694.30	1215.10
		652.90	1471	1475	695.40	1216.90

<sup>1</sup>This revised table of benefits was published in the Federal Register on May 15, 1978 (43 FR 20867), as required by P.L. 93-66, § 203, as follows:

"(f) Effective June 1, 1974, the Secretary of Health, Education, and Welfare, shall prescribe and published in the Federal Register such modifications and extensions in the table contained in section 215(a) of the Social Security Act (which shall be determined in the same manner as the revisions in such table provided for under section 215(i)(2)(D) of such Act) as may be necessary to reflect the amendments made by this section; and such modified and extended table shall be deemed to be the table appearing in such section 215(a)." This table was effective through May 1979. For the table effective beginning June 1979, see p. 228.



**Provision Deemed to be in Social Security Act, as in Effect Prior to  
November 1, 1979 (44 Federal Register 62956)  
[Cost-of-Living Increase; Extension]**

SEC. 215.

(a)

**TABLE FOR DETERMINING PRIMARY INSURANCE AMOUNT AND MAXIMUM FAMILY  
BENEFITS BEGINNING JANUARY 1979<sup>1</sup>**

I (Primary insurance benefit under 1939 Act, as modified)		II (Primary insurance amount ef- fective for June 1977)	III (Average monthly wage)		IV (Primary insurance amount)	V (Maximum family ben- efits)
If an individual's primary insurance benefit (as deter- mined under subsec. (d)) is—		Or his pri- mary insur- ance amount (as determined under sub- sec. (c)) is—	Or his average monthly wage (as de- termined under sub- sec. (b)) is—		The amount referred to in the pre- ceding para- graphs of this sub- section shall be—	And the maximum amount of benefits payable (as provided in sec. 203(a)) on the basis of his wages and self- employ- ment in- come shall be—
At least—	But not more than—		At least—	But not more than—		
			\$1476	\$1480	\$696.40	\$1218.70
			1481	1485	697.40	1220.50
			1486	1490	698.40	1222.20
			1491	1495	699.40	1224.00
			1496	1500	700.40	1225.70
			1501	1505	701.40	1227.50
			1506	1510	702.40	1229.20
			1511	1515	703.40	1231.00
			1516	1520	704.40	1232.70
			1521	1525	705.40	1234.50
			1526	1530	706.40	1236.20
			1531	1535	707.40	1238.00
			1536	1540	708.40	1239.70
			1541	1545	709.40	1241.50
			1546	1550	710.40	1243.20
			1551	1555	711.40	1245.00
			1556	1560	712.40	1246.70
			1561	1565	713.40	1248.50
			1566	1570	714.40	1250.20
			1571	1575	715.40	1252.00
			1576	1580	716.40	1253.70
			1581	1585	717.40	1255.50
			1586	1590	718.40	1257.20
			1591	1595	719.40	1259.00
			1596	1600	720.40	1260.70
			1601	1605	721.40	1262.50
			1606	1610	722.40	1264.20
			1611	1615	723.40	1266.00
			1616	1620	724.40	1267.70
			1621	1625	725.40	1269.50
			1626	1630	726.40	1271.20
			1631	1635	727.40	1273.00
			1636	1640	728.40	1274.70
			1641	1645	729.40	1276.50

I (Primary insurance benefit under 1939 Act, as modified)		II (Primary insurance amount ef- fective for June 1977)	III (Average monthly wage)		IV (Primary insurance amount)	V (Maximum family ben- efits)
If an individual's primary insurance benefit (as deter- mined under subsec. (d)) is—		Or his pri- mary insur- ance amount (as determined under sub- sec. (c)) is—	Or his average monthly wage (as de- termined under sub- sec. (b)) is—		The amount referred to in the pre- ceding para- graphs of this sub- section shall be—	And the maximum amount of benefits payable (as provided in sec. 203(a)) on the basis of his wages and self- employ- ment in- come shall be—
At least—	But not more than—		At least—	But not more than—		
			1646	1650	730.40	1278.20
			1651	1655	731.40	1280.00
			1656	1660	732.40	1281.70
			1661	1665	733.40	1283.50
			1666	1670	734.40	1285.20
			1671	1675	735.40	1287.00
			1676	1680	736.40	1288.70
			1681	1685	737.40	1290.50
			1686	1690	738.40	1292.20
			1691	1695	739.40	1294.00
			1696	1700	740.40	1295.70
			1701	1705	741.40	1297.50
			1706	1710	742.40	1299.20
			1711	1715	743.40	1301.00
			1716	1720	744.40	1302.70
			1721	1725	745.40	1304.50
			1726	1730	746.40	1306.20
			1731	1735	747.40	1308.00
			1736	1740	748.40	1309.70
			1741	1745	749.40	1311.50
			1746	1750	750.40	1313.20
			1751	1755	751.40	1315.00
			1756	1760	752.40	1316.70
			1761	1765	753.40	1318.50
			1766	1770	754.40	1320.20
			1771	1775	755.40	1322.00
			1776	1780	756.40	1323.70
			1781	1785	757.40	1325.50
			1786	1790	758.40	1327.20
			1791	1795	759.40	1329.00
			1796	1800	760.40	1330.70
			1801	1805	761.40	1332.50
			1806	1810	762.40	1334.20
			1811	1815	763.40	1336.00
			1816	1820	764.40	1337.70
			1821	1825	765.40	1339.50
			1826	1830	766.40	1341.20
			1831	1835	767.40	1343.00
			1836	1840	768.40	1344.70
			1841	1845	769.40	1346.50
			1846	1850	770.40	1348.20
			1851	1855	771.40	1350.00
			1856	1860	772.40	1351.70
			1861	1865	773.40	1353.50
			1866	1870	774.40	1355.20
			1871	1875	775.40	1357.00
			1876	1880	776.40	1358.70

## SUPERSEDED PROVISIONS—SOCIAL SECURITY ACT

337 03/86

44 FR 62956

227

I (Primary insurance benefit under 1939 Act, as modified)		II (Primary insurance amount ef- fective for June 1977)		III (Average monthly wage)		IV (Primary insurance amount)	V (Maximum family ben- efits)
If an individual's primary insurance benefit (as deter- mined under subsec. (d)) is—		Or his pri- mary insur- ance amount (as determined under sub- sec. (c)) is—		Or his average monthly wage (as de- termined under sub- sec. (b)) is—		The amount referred to in the pre- ceding para- graphs of this sub- section shall be—	And the maximum amount of benefits payable (as provided in sec. 203(a)) on the basis of his wages and self- employ- ment in- come shall be—
At least—	But not more than—			At least—	But not more than—		
				1881	1885	777.40	1360.50
				1886	1890	778.40	1362.20
				1891	1895	779.40	1364.00
				1896	1900	780.40	1365.70
				1901	1905	781.40	1367.50
				1906	1910	782.40	1369.20

<sup>1</sup>This extension was published at 43 FR 53504, November 16, 1978. This data was prepared and published as required by Social Security Act §215(a)(5) and §215(i)(2)(D).



## SUPERSEDED PROVISIONS—SOCIAL SECURITY ACT

**Provision Deemed to be in Social Security Act, as in Effect Prior to  
May 14, 1980 (45 Federal Register 31781)  
[Cost-of-Living Increase]**

SEC. 215.

(a)

**TABLE 1.—TABLE FOR DETERMINING PRIMARY INSURANCE AMOUNT AND MAXIMUM  
FAMILY BENEFITS BEGINNING JUNE 1979<sup>1</sup>**

I (Primary insurance benefit under 1939 Act, as modified)		II (Primary insurance amount ef- fective for June 1978)	III (Average monthly wage)		IV (Primary insurance amount)	V (Maximum family ben- efits)
If an individual's primary insurance benefit (as deter- mined under subsec. (d)) is—		Or his pri- mary insur- ance amount (as determined under sub- sec. (c)) is—	Or his average monthly wage (as de- termined under sub- sec. (b)) is—		The amount referred to in the pre- ceding para- graphs of this sub- section shall be—	And the maximum amount of benefits payable (as provided in sec. 203(a)) on the basis of his wages and self- employ- ment in- come shall be—
At least—	But not more than—		At least—	But not more than—		
	\$16.20	\$121.80		\$76	\$133.90	\$200.90
\$16.21	16.84	123.70	\$77	78	136.00	204.00
16.85	17.60	126.60	79	80	139.20	208.80
17.61	18.40	128.90	81	81	141.70	212.70
18.41	19.24	131.20	82	83	144.20	216.30
19.25	20.00	134.00	84	85	147.30	221.00
20.01	20.64	136.50	86	87	150.10	225.20
20.65	21.28	138.60	88	89	152.40	228.60
21.29	21.88	141.40	90	90	155.40	233.10
21.89	22.28	143.80	91	92	158.10	237.20
22.29	22.68	146.20	93	94	160.70	241.10
22.69	23.08	148.50	95	96	163.30	245.00
23.09	23.44	151.30	97	97	166.30	249.50
23.45	23.76	153.70	98	99	169.00	253.50
23.77	24.20	156.70	100	101	172.30	258.50
24.21	24.60	158.90	102	102	174.70	262.20
24.61	25.00	161.60	103	104	177.60	266.40
25.01	25.48	164.60	105	106	180.90	271.40
25.49	25.92	167.30	107	107	183.90	275.90
25.93	26.40	169.80	108	109	186.70	280.10
26.41	26.94	172.50	110	113	189.60	284.50
26.95	27.46	174.90	114	118	192.30	288.50
27.47	28.00	177.60	119	122	195.20	292.90
28.01	28.68	180.40	123	127	198.30	297.50
28.69	29.25	183.00	128	132	201.20	301.80
29.26	29.68	185.50	133	136	203.90	305.90
29.69	30.36	188.00	137	141	206.70	310.10
30.37	30.92	190.80	142	146	209.70	314.60
30.93	31.36	193.60	147	150	212.80	319.20
31.37	32.00	195.90	151	155	215.30	323.00
32.01	32.60	198.70	156	160	218.40	327.70
32.61	33.20	201.30	161	164	221.30	332.00
33.21	33.88	203.90	165	169	224.10	336.20
33.89	34.50	206.70	170	174	227.20	340.80
34.51	35.00	209.10	175	178	229.90	344.90
35.01	35.80	211.90	179	183	232.90	349.50
35.81	36.40	214.40	184	188	235.70	353.60

## SUPERSEDED PROVISIONS—SOCIAL SECURITY ACT

337 03/86

45 FR 31781

229

I (Primary insurance benefit under 1939 Act, as modified)		II (Primary insurance amount ef- fective for June 1978)	III (Average monthly wage)		IV (Primary insurance amount)	V (Maximum family ben- efits)
If an individual's primary insurance benefit (as deter- mined under subsec. (d)) is—		Or his pri- mary insur- ance amount (as determined under sub- sec. (c)) is—	Or his average monthly wage (as de- termined under sub- sec. (b)) is—		The amount referred to in the pre- ceding para- graphs of this sub- section shall be—	And the maximum amount of benefits payable (as provided in sec. 203(a)) on the basis of his wages and self- employ- ment in- come shall be—
At least—	But not more than—		At least—	But not more than—		
36.41	37.08	217.20	189	193	238.80	358.30
37.09	37.60	219.90	194	197	241.70	362.60
37.61	38.20	222.40	198	202	244.50	366.80
38.21	39.12	225.30	203	207	247.70	371.60
39.13	39.68	228.00	208	211	250.60	375.90
39.69	40.33	230.10	212	216	252.90	379.40
40.34	41.12	233.00	217	221	256.10	384.20
41.13	41.76	235.60	222	225	259.00	388.50
41.77	42.44	238.50	226	230	262.20	393.30
42.45	43.20	241.10	231	235	265.00	397.60
43.21	43.76	244.00	236	239	268.20	402.40
43.77	44.44	246.30	240	244	270.70	407.90
44.45	44.88	248.70	245	249	273.40	416.40
44.89	45.60	251.80	250	253	276.80	423.10
		254.30	254	258	279.50	431.40
		256.50	259	263	281.90	439.60
		259.60	264	267	285.40	446.20
		262.10	268	272	288.10	454.70
		264.90	273	277	291.20	462.90
		267.40	278	281	293.90	469.50
		270.00	282	286	296.80	478.00
		272.90	287	291	300.00	486.50
		275.10	292	295	302.40	493.00
		278.10	296	300	305.70	501.30
		280.70	301	305	308.50	509.80
		283.10	306	309	311.20	516.40
		286.00	310	314	314.40	524.70
		288.30	315	319	316.90	533.20
		291.00	320	323	319.90	539.80
		293.80	324	328	322.90	548.10
		296.20	329	333	325.60	556.40
		299.30	334	337	329.00	563.30
		301.40	338	342	331.30	571.40
		304.20	343	347	334.40	579.80
		307.10	348	351	337.60	586.50
		309.40	352	356	340.10	594.80
		312.40	357	361	343.40	603.20
		314.90	362	365	346.10	609.90
		317.30	366	370	348.80	618.20
		320.20	371	375	351.90	626.40
		322.90	376	379	354.90	633.40
		325.60	380	384	357.90	641.80
		328.00	385	389	360.50	649.90
		330.50	390	393	363.30	656.60
		333.40	394	398	366.50	665.10
		336.00	399	403	369.30	673.40
		338.90	404	407	372.50	679.90

SUPERSEDED PROVISIONS—SOCIAL SECURITY ACT

230 45 FR 31781

337 03/86

I (Primary insurance benefit under 1939 Act, as modified)		II (Primary insurance amount ef- fective for June 1978)		III (Average monthly wage)		IV (Primary insurance amount)	V (Maximum family ben- efits)
If an individual's primary insurance benefit (as deter- mined under subsec. (d)) is—		Or his pri- mary insur- ance amount (as determined under sub- sec. (c)) is—		Or his average monthly wage (as de- termined under sub- sec. (b)) is—		The amount referred to in the pre- ceding para- graphs of this sub- section shall be—	And the maximum amount of benefits payable (as provided in sec. 203(a)) on the basis of his wages and self- employ- ment in- come shall be—
At least—	But not more than—			At least—	But not more than—		
		341.10		408	412	374.90	688.40
		343.50		413	417	377.60	696.60
		346.00		418	421	380.30	703.30
		348.70		422	426	383.30	711.70
		351.10		427	431	385.90	720.00
		353.20		432	436	388.20	728.40
		356.20		437	440	391.50	731.70
		358.40		441	445	393.90	736.10
		360.80		446	450	396.60	740.10
		363.50		451	454	399.50	743.30
		365.90		455	459	402.20	747.50
		368.30		460	464	404.80	751.50
		370.60		465	468	407.30	755.20
		373.50		469	473	410.50	759.20
		375.60		474	478	412.80	763.40
		378.00		479	482	415.50	766.80
		380.70		483	487	418.40	771.10
		383.10		488	492	421.10	775.30
		385.50		493	496	423.70	778.60
		388.20		497	501	426.70	782.60
		390.50		502	506	429.20	786.70
		392.90		507	510	431.80	790.20
		395.30		511	515	434.50	794.40
		398.00		516	520	437.50	798.70
		400.30		521	524	440.00	801.80
		402.70		525	529	442.60	806.10
		405.60		530	534	445.80	810.10
		407.70		535	538	448.10	813.50
		410.20		539	543	450.90	817.80
		412.80		544	548	453.70	821.90
		415.30		549	553	456.50	826.10
		417.60		554	556	459.00	828.60
		419.60		557	560	461.20	831.90
		421.90		561	563	463.70	834.50
		424.10		564	567	466.10	837.80
		426.50		568	570	468.80	840.20
		428.50		571	574	471.00	843.50
		430.70		575	577	473.40	846.20
		432.70		578	581	475.60	849.40
		435.00		582	584	478.10	852.00
		436.90		585	588	480.20	855.30
		439.50		589	591	483.10	857.80
		441.60		592	595	485.40	861.10
		443.80		596	598	487.80	863.40
		446.00		599	602	490.20	867.10
		448.10		603	605	492.50	869.50
		450.30		606	609	494.90	872.70



## SUPERSEDED PROVISIONS—SOCIAL SECURITY ACT

337 03/86

45 FR 31781

231

I (Primary insurance benefit under 1939 Act, as modified)		II (Primary insurance amount effective for June 1978)	III (Average monthly wage)		IV (Primary insurance amount)	V (Maximum family benefits)
If an individual's primary insurance benefit (as determined under subsec. (d)) is—		Or his primary insurance amount (as determined under subsec. (c)) is—	Or his average monthly wage (as determined under subsec. (b)) is—		The amount referred to in the preceding paragraphs of this subsection shall be—	And the maximum amount of benefits payable (as provided in sec. 203(a)) on the basis of his wages and self-employment income shall be—
At least—	But not more than—		At least—	But not more than—		
		452.60	610	612	497.50	875.40
		454.70	613	616	499.80	878.70
		456.80	617	620	502.10	882.00
		459.10	621	623	504.60	884.50
		461.20	624	627	506.90	887.90
		463.40	628	630	509.30	891.00
		465.60	631	634	511.70	895.40
		467.80	635	637	514.20	899.60
		470.10	638	641	516.70	903.90
		472.10	642	644	518.90	907.90
		474.40	645	648	521.40	912.30
		476.50	649	652	523.70	916.30
		477.80	653	656	525.20	918.90
		479.20	657	660	526.70	921.50
		480.90	661	665	528.60	924.90
		482.60	666	670	530.40	928.20
		484.40	671	675	532.40	931.30
		486.10	676	680	534.30	934.70
		487.80	681	685	536.10	938.00
		489.70	686	690	538.20	941.20
		491.20	691	695	539.90	944.80
		492.90	696	700	541.70	948.00
		494.70	701	705	543.70	951.30
		496.40	706	710	545.60	954.60
		498.20	711	715	547.60	957.80
		500.00	716	720	549.50	961.20
		501.70	721	725	551.40	964.50
		503.40	726	730	553.30	967.90
		505.10	731	735	555.20	971.30
		506.90	736	740	557.10	974.50
		508.50	741	745	558.90	978.00
		510.10	746	750	560.60	981.10
		511.70	751	755	562.40	984.10
		513.20	756	760	564.10	986.70
		514.70	761	765	565.70	989.60
		516.00	766	770	567.10	992.40
		517.40	771	775	568.70	995.10
		518.90	776	780	570.30	997.80
		520.40	781	785	572.00	1000.60
		521.70	786	790	573.40	1003.30
		523.10	791	795	574.90	1006.10
		524.60	796	800	576.60	1008.90
		526.20	801	805	578.30	1011.70
		527.50	806	810	579.80	1014.40
		529.00	811	815	581.40	1017.30
		530.40	816	820	583.00	1019.90
		531.90	821	825	584.60	1022.80

I (Primary insurance benefit under 1939 Act, as modified)		II (Primary insurance amount ef- fective for June 1978)	III (Average monthly wage)		IV (Primary insurance amount)	V (Maximum family ben- efits)
If an individual's primary insurance benefit (as deter- mined under subsec. (d)) is—		Or his pri- mary insur- ance amount (as determined under subsec. (c)) is—	Or his average monthly wage (as de- termined under sub- sec. (b)) is—		The amount referred to in the pre- ceding para- graphs of this sub- section shall be—	And the maximum amount of benefits payable (as provided in sec. 203(a)) on the basis of his wages and self- employ- ment in- come shall be—
At least—	But not more than—		At least—	But not more than—		
		533.30	826	830	586.10	1025.50
		534.70	831	835	587.70	1028.40
		536.10	836	840	589.20	1031.00
		537.60	841	845	590.90	1034.00
		538.90	846	850	592.30	1036.40
		540.50	851	855	594.10	1039.40
		541.90	856	860	595.60	1042.00
		543.40	861	865	597.20	1044.90
		544.80	866	870	598.80	1047.60
		546.30	871	875	600.40	1050.40
		547.60	876	880	601.90	1053.10
		549.10	881	885	603.50	1056.00
		550.40	886	890	604.90	1058.60
		551.90	891	895	606.60	1061.70
		553.40	896	900	608.20	1064.20
		554.90	901	905	609.90	1067.10
		556.30	906	910	611.40	1069.90
		557.80	911	915	613.10	1072.70
		559.30	916	920	614.70	1075.20
		560.60	921	925	616.10	1078.20
		561.90	926	930	617.60	1080.80
		563.40	931	935	619.20	1083.60
		564.90	936	940	620.90	1086.40
		566.30	941	945	622.40	1089.20
		567.70	946	950	624.00	1091.90
		569.30	951	955	625.70	1094.80
		570.80	956	960	627.40	1097.50
		572.30	961	965	629.00	1100.10
		573.40	966	970	630.20	1103.00
		574.90	971	975	631.90	1105.90
		576.40	976	980	633.50	1108.40
		577.90	981	985	635.20	1111.20
		579.20	986	990	636.60	1114.00
		580.70	991	995	638.20	1116.90
		582.20	996	1000	639.90	1119.50
		583.50	1001	1005	641.30	1121.80
		584.60	1006	1010	642.50	1124.50
		586.00	1011	1015	644.10	1126.90
		587.40	1016	1020	645.60	1129.60
		588.60	1021	1025	646.90	1131.90
		589.80	1026	1030	648.20	1134.40
		591.20	1031	1035	649.80	1137.00
		592.40	1036	1040	651.10	1139.40
		593.80	1041	1045	652.60	1142.00
		595.20	1046	1050	654.20	1144.40
		596.20	1051	1055	655.30	1146.70
		597.60	1056	1060	656.80	1149.50

## SUPERSEDED PROVISIONS—SOCIAL SECURITY ACT

337 03/86

45 FR 31781 233

I (Primary insurance benefit under 1939 Act, as modified)		II (Primary insurance amount ef- fective for June 1978)	III (Average monthly wage)		IV (Primary insurance amount)	V (Maximum family ben- efits)
If an individual's primary insurance benefit (as deter- mined under subsec. (d)) is—		Or his pri- mary insur- ance amount (as determined under sub- sec. (c)) is—	Or his average monthly wage (as de- termined under sub- sec. (b)) is—		The amount referred to in the pre- ceding para- graphs of this sub- section shall be—	And the maximum amount of benefits payable (as provided in sec. 203(a)) on the basis of his wages and self- employ- ment in- come shall be—
At least—	But not more than—		At least—	But not more than—		
		599.00	1061	1065	658.40	1151.80
		600.30	1066	1070	659.80	1154.50
		601.60	1071	1075	661.20	1156.90
		602.80	1076	1080	662.50	1159.40
		604.20	1081	1085	664.10	1161.80
		605.40	1086	1090	665.40	1164.30
		606.80	1091	1095	666.90	1166.90
		608.20	1096	1100	668.50	1169.40
		609.20	1101	1105	669.60	1171.70
		610.60	1106	1110	671.10	1174.30
		612.00	1111	1115	672.60	1176.70
		613.20	1116	1120	674.00	1179.40
		614.60	1121	1125	675.50	1181.80
		615.80	1126	1130	676.80	1184.30
		617.10	1131	1135	678.20	1186.60
		618.40	1136	1140	679.70	1189.40
		619.80	1141	1145	681.20	1191.80
		621.10	1146	1150	682.60	1194.30
		622.20	1151	1155	683.80	1196.60
		623.60	1156	1160	685.40	1199.20
		624.90	1161	1165	686.80	1201.70
		626.20	1166	1170	688.20	1204.30
		627.50	1171	1175	689.70	1206.80
		628.70	1176	1180	691.00	1209.20
		629.90	1181	1185	692.30	1211.40
		631.20	1186	1190	693.70	1213.70
		632.30	1191	1195	694.90	1216.10
		633.50	1196	1200	696.30	1218.40
		634.70	1201	1205	697.60	1220.60
		636.00	1206	1210	699.00	1223.10
		637.10	1211	1215	700.20	1225.30
		638.30	1216	1220	701.50	1227.60
		639.50	1221	1225	702.90	1229.80
		640.80	1226	1230	704.30	1232.20
		641.90	1231	1235	705.50	1234.40
		643.10	1236	1240	706.80	1236.90
		644.40	1241	1245	708.20	1239.20
		645.50	1246	1250	709.50	1241.50
		646.70	1251	1255	710.80	1243.70
		647.90	1256	1260	712.10	1246.10
		649.20	1261	1265	713.50	1248.40
		650.30	1266	1270	714.70	1250.70
		651.50	1271	1275	716.00	1252.90
		652.70	1276	1280	717.40	1255.30
		653.70	1281	1285	718.50	1257.40
		654.90	1286	1290	719.80	1259.60
		656.10	1291	1295	721.10	1261.70



## SUPERSEDED PROVISIONS—SOCIAL SECURITY ACT

234 45 FR 31781

337 03/86

I (Primary insurance benefit under 1939 Act, as modified)		II (Primary insurance amount ef- fective for June 1978)	III (Average monthly wage)		IV (Primary insurance amount)	V (Maximum family ben- efits)
If an individual's primary insurance benefit (as deter- mined under subsec. (d)) is—		Or his pri- mary insur- ance amount (as determined under sub- sec. (c)) is—	Or his average monthly wage (as de- termined under sub- sec. (b)) is—		The amount referred to in the pre- ceding para- graphs of this sub- section shall be—	And the maximum amount of benefits payable (as provided in sec. 203(a)) on the basis of his wages and self- employ- ment in- come shall be—
At least—	But not more than—		At least—	But not more than—		
		657.20	1296	1300	722.30	1263.90
		658.30	1301	1305	723.50	1266.10
		659.40	1306	1310	724.70	1268.30
		660.60	1311	1315	726.00	1270.40
		661.70	1316	1320	727.30	1272.60
		662.80	1321	1325	728.50	1274.70
		664.00	1326	1330	729.80	1277.00
		665.00	1331	1335	730.90	1279.10
		666.20	1336	1340	732.20	1281.30
		667.40	1341	1345	733.50	1283.40
		668.40	1346	1350	734.60	1285.60
		669.60	1351	1355	735.90	1287.70
		670.70	1356	1360	737.10	1289.90
		671.90	1361	1365	738.50	1292.00
		672.90	1366	1370	739.60	1294.30
		674.10	1371	1375	740.90	1296.40
		675.20	1376	1380	742.10	1298.60
		676.20	1381	1385	743.20	1300.60
		677.30	1386	1390	744.40	1302.70
		678.30	1391	1395	745.50	1304.70
		679.40	1396	1400	746.70	1306.80
		680.50	1401	1405	747.90	1308.70
		681.50	1406	1410	749.00	1310.80
		682.60	1411	1415	750.20	1312.90
		683.70	1416	1420	751.40	1315.00
		684.70	1421	1425	752.50	1317.00
		685.80	1426	1430	753.70	1319.10
		686.90	1431	1435	755.00	1321.00
		687.90	1436	1440	756.10	1323.10
		689.00	1441	1445	757.30	1325.10
		690.10	1446	1450	758.50	1327.30
		691.10	1451	1455	759.60	1329.30
		692.20	1456	1460	760.80	1331.40
		693.30	1461	1465	762.00	1333.40
		694.30	1466	1470	763.10	1335.40
		695.40	1471	1475	764.30	1337.40
		696.40	1476	1480	765.40	1339.40
		697.40	1481	1485	766.50	1341.40
		698.40	1486	1490	767.60	1343.20
		699.40	1491	1495	768.70	1345.20
		700.40	1496	1500	769.80	1347.10
		701.40	1501	1505	770.90	1349.10
		702.40	1506	1510	772.00	1350.90
		703.40	1511	1515	773.10	1352.90
		704.40	1516	1520	774.20	1354.80
		705.40	1521	1525	775.30	1356.80
		706.40	1526	1530	776.40	1358.60

## SUPERSEDED PROVISIONS—SOCIAL SECURITY ACT

337 03/86

45 FR 31781

235

I (Primary insurance benefit under 1939 Act, as modified)		II (Primary insurance amount ef- fective for June 1978)	III (Average monthly wage)		IV (Primary insurance amount)	V (Maximum family ben- efits)
If an individual's primary insurance benefit (as deter- mined under subsec. (d)) is—		Or his pri- mary insur- ance amount (as determined under sub- sec. (c)) is—	Or his average monthly wage (as de- termined under sub- sec. (b)) is—		The amount referred to in the pre- ceding para- graphs of this sub- section shall be—	And the maximum amount of benefits payable (as provided in sec. 203(a)) on the basis of his wages and self- employ- ment in- come shall be—
At least—	But not more than—		At least—	But not more than—		
		707.40	1531	1535	777.50	1360.60
		708.40	1536	1540	778.60	1362.50
		709.40	1541	1545	779.70	1364.50
		710.40	1546	1550	780.80	1366.30
		711.40	1551	1555	781.90	1368.30
		712.40	1556	1560	783.00	1370.20
		713.40	1561	1565	784.10	1372.20
		714.40	1566	1570	785.20	1374.00
		715.40	1571	1575	786.30	1376.00
		716.40	1576	1580	787.40	1377.90
		717.40	1581	1585	788.50	1379.80
		718.40	1586	1590	789.60	1381.70
		719.40	1591	1595	790.70	1383.70
		720.40	1596	1600	791.80	1385.60
		721.40	1601	1605	792.90	1387.50
		722.40	1606	1610	794.00	1389.40
		723.40	1611	1615	795.10	1391.40
		724.40	1616	1620	796.20	1393.30
		725.40	1621	1625	797.30	1395.20
		726.40	1626	1630	798.40	1397.10
		727.40	1631	1635	799.50	1399.10
		728.40	1636	1640	800.60	1400.90
		729.40	1641	1645	801.70	1402.90
		730.40	1646	1650	802.80	1404.80
		731.40	1651	1655	803.90	1406.80
		732.40	1656	1660	805.00	1408.60
		733.40	1661	1665	806.10	1410.60
		734.40	1666	1670	807.20	1412.50
		735.40	1671	1675	808.30	1414.50
		736.40	1676	1680	809.40	1416.30
		737.40	1681	1685	810.50	1418.30
		738.40	1686	1690	811.60	1420.20
		739.40	1691	1695	812.70	1422.20
		740.40	1696	1700	813.70	1424.00
		741.40	1701	1705	814.80	1426.00
		742.40	1706	1710	815.90	1427.90
		743.40	1711	1715	817.00	1429.80
		744.40	1716	1720	818.10	1431.70
		745.40	1721	1725	819.20	1433.70
		746.40	1726	1730	820.30	1435.60
		747.40	1731	1735	821.40	1437.50
		748.40	1736	1740	822.50	1439.40
		749.40	1741	1745	823.60	1441.40
		750.40	1746	1750	824.70	1443.30
		751.40	1751	1755	825.80	1445.20
		752.40	1756	1760	826.90	1447.10
		753.40	1761	1765	828.00	1449.10

## SUPERSEDED PROVISIONS—SOCIAL SECURITY ACT

236 45 FR 31781

337 03/86

I (Primary insurance benefit under 1939 Act, as modified)		II (Primary insurance amount effective for June 1978)	III (Average monthly wage)		IV (Primary insurance amount)	V (Maximum family benefits)
If an individual's primary insurance benefit (as determined under subsec. (d)) is—		Or his primary insurance amount (as determined under subsec. (c)) is—	Or his average monthly wage (as determined under subsec. (b)) is—		The amount referred to in the preceding paragraphs of this subsection shall be—	And the maximum amount of benefits payable (as provided in sec. 203(a) on the basis of his wages and self-employment income shall be—
At least—	But not more than—		At least—	But not more than—		
		754.40	1766	1770	829.10	1450.90
		755.40	1771	1775	830.20	1452.90
		756.40	1776	1780	831.30	1454.80
		757.40	1781	1785	832.40	1456.80
		758.40	1786	1790	833.50	1458.60
		759.40	1791	1795	834.60	1460.60
		760.40	1796	1800	835.70	1462.50
		761.40	1801	1805	836.80	1464.50
		762.40	1806	1810	837.90	1466.30
		763.40	1811	1815	839.00	1468.30
		764.40	1816	1820	840.10	1470.20
		765.40	1821	1825	841.20	1472.20
		766.40	1826	1830	842.30	1474.00
		767.40	1831	1835	843.40	1476.00
		768.40	1836	1840	844.50	1477.90
		769.40	1841	1845	845.60	1479.90
		770.40	1846	1850	846.70	1481.70
		771.40	1851	1855	847.80	1483.70
		772.40	1856	1860	848.90	1485.60
		773.40	1861	1865	850.00	1487.50
		774.40	1866	1870	851.10	1489.40
		775.40	1871	1875	852.20	1491.40
		776.40	1876	1880	853.30	1493.30
		777.40	1881	1885	854.40	1495.20
		778.40	1886	1890	855.50	1497.10
		779.40	1891	1895	856.60	1499.10
		780.40	1896	1900	857.70	1501.00
		781.40	1901	1905	858.80	1502.90
		782.40	1906	1910	859.90	1504.80

This revised table of benefits was published in the Federal Register on May 15, 1979 (44 FR 28423), as required by P.L. 93-66, §203(f), which reads as follows:

"(f) Effective June 1, 1974, the Secretary of Health, Education, and Welfare, shall prescribe and publish in the Federal Register such modifications and extensions in the table contained in section 215(a) of the Social Security Act (which shall be determined in the same manner as the revisions in such table provided for under section 215(i)(2)(D) of such Act) as may be necessary to reflect the amendments made by this section; and such modified and extended table shall be deemed to be the table appearing in such section 215(a)."

These rates apply to payments for June 1979 through May 1980. For the table effective beginning June 1980, see p. 250.



**SUPERSEDED PROVISIONS—SOCIAL SECURITY ACT**

337 03/86

P.L. 96-265 §216. 237

**TABLE 2.—9.9% GENERAL BENEFIT INCREASE**

**TABLE FOR DETERMINING PRIMARY INSURANCE AMOUNT AND MAXIMUM FAMILY BENEFITS UNDER SUBPARAGRAPH (C)(i)(II) OF SUBSECTION 215(a)(1) BEGINNING JUNE 1979<sup>2</sup>**

I (Years of coverage)	II (Primary insurance amount)	III (Maximum family benefits)
If an individual's years of coverage (as determined under sec. 215(a)(1)(C)(ii)) are—	The amount referred to in sec. 215(a)(1)(C)(i)(II) shall be—	And the maximum amount of benefits payable (as provided in sec. 215(i)(2)(D)) on the basis of his or her wages and self-employment income shall be—
11	\$12.70	\$19.10
12	25.30	38.00
13	38.00	57.00
14	50.60	75.90
15	63.20	94.90
16	75.90	113.90
17	88.50	132.80
18	101.20	151.80
19	113.80	170.70
20	126.40	189.60
21	139.10	208.70
22	151.70	227.60
23	164.40	246.60
24	177.00	265.50
25	189.60	284.50
26	202.30	303.50
27	214.90	322.40
28	227.50	341.30
29	240.20	360.30
30	252.80	379.20

NOTE: The amounts shown in the above table for years of coverage less than 21 are not payable for June 1979 through December 1979 because the corresponding values shown in column II are less than the \$133.90 minimum primary insurance amount payable for that period. For months after December 1979, a special minimum primary insurance amount of \$126.40 will be payable. [45 Federal Register 24702; April 10, 1980.]

<sup>2</sup>This table was published in the Federal Register on May 15, 1979 (44 FR 28423).

**Provisions of the Social Security Act as in Effect Prior to  
P.L. 96-265, Approved June 9, 1980 (94 Stat. 441)  
Social Security Disability Amendments of 1980**

**SEC. 202.**

(j)

(2) An application for any monthly benefits under this section filed before the first month in which the applicant satisfies the requirements for such benefits shall be deemed a valid application only if the applicant satisfies the requirements for such benefits before the Secretary makes a final decision on the application. If upon final decision by the Secretary, or decision upon judicial review thereof, such applicant is found to satisfy such requirements, the application shall be deemed to have been filed in such first month.

**SEC. 215.**

(b)

(2)(A) The number of an individual's benefit computation years equals the number of elapsed years, reduced by five, except that the number of an individual's benefit computation years may not be less than two.

**SEC. 216.**

(i)

(2)

(D) (ii) the second month following the month in which the disability ceases.

## SEC. 218.

(e)(1)

(A) that the State will pay to the Secretary of the Treasury, at such time or times as the Administrator may by regulations prescribe, amounts equivalent to the sum of the taxes which would be imposed by sections 1400 and 1410 of the Internal Revenue Code if the services of employees covered by the agreement constituted employment as defined in section 1426 of such code; and

SEC. 221. (a) In the case of any individual, the determination of whether or not he is under a disability (as defined in section 216(i) or 223(d)) and of the day such disability began, and the determination of the day on which such disability ceases, shall, except as provided in subsection (g), be made by a State agency pursuant to an agreement entered into under subsection (b). Except as provided in subsections (c) and (d), any such determination shall be the determination of the Secretary for purposes of this title.

(b) The Secretary shall enter into an agreement with each State which is willing to make such an agreement under which the State agency or agencies administering the State plan approved under the Vocational Rehabilitation Act or any other appropriate State agency or agencies, or both, will make the determinations referred to in subsection (a) with respect to all individuals in such State, or with respect to such class or classes of individuals in the State as may be designated in the agreement at the State's request.

(c) The Secretary may on his own motion review a determination, made by a State agency pursuant to an agreement under this section, that an individual is under a disability (as defined in section 216(i) or 223(d)) and, as a result of such review, may determine that such individual is not under a disability (as so defined) or that such disability began on a day later than that determined by such agency, or that such disability ceased on a day earlier than that determined by such agency.

**Provisions of the Social Security Act as in Effect Prior to  
P.L. 96-272, Approved June 17, 1980 (94 Stat. 500)  
Adoption Assistance and Child Welfare Act of 1980**

SEC. 402. (a) (20) effective July 1, 1969, provide for aid to families with dependent children in the form of foster care in accordance with section 408;

**FEDERAL PAYMENTS FOR FOSTER HOME CARE OF DEPENDENT CHILDREN<sup>1</sup>**

SEC. 408. Effective for the period beginning May 1, 1961—

(a) the term "dependent child" shall, notwithstanding section 406(a), also include a child (1) who would meet the requirements of such section 406(a) or of section 407 except for his removal after April 30, 1961, from the home of a relative (specified in such section 406(a)) pursuant to a voluntary placement agreement entered into by the child's parent or legal guardian, or<sup>2</sup> as a result of a judicial determination to the effect that continuation therein would be contrary to the welfare of such child, (2) whose placement and care are the responsibility of (A) the State or local agency administering the State plan approved under section 402, or (B) any other public agency with whom the State agency administering or supervising the administration of such State plan has made an agreement which is still in effect and which includes provision for assuring development of a plan, satisfactory to such State agency, for such child as provided in paragraph (f)(1) and such other provisions as may be necessary to assure accomplishment of the objectives of the State plan approved under section 402, (3) who has been placed in a foster family home or child-care institution as a result of such voluntary placement agreement or judicial<sup>3</sup> determination, and (4) who (A) received aid under such State plan in or for the month in which such agreement was entered into or<sup>4</sup> court proceedings leading to such determination were initiated, or (B)(i)

<sup>1</sup>P.L. 96-272, §101(a)(2)(A), repealed §408, effective with respect to expenditures made after September 30, 1980; except that pursuant to §101(a)(2)(B) the repeal was not applicable in the case of any State for any quarter prior to the first quarter, which began after September 30, 1980, in which such State had in effect a State plan approved under part E of title IV of the Social Security Act, or (if earlier) such repeal shall be effective with respect to expenditures made after September 30, 1982.

<sup>2</sup>P.L. 96-272, §102(b)(1)(A), added "pursuant to a voluntary placement agreement entered into by the child's parent or legal guardian, or", effective only with respect to expenditures made after September 30, 1979 (but subject to the repeal provided under §101(a)(2)(A) and (B)).

<sup>3</sup>P.L. 96-272, §102(b)(1)(B), inserted "such voluntary placement agreement or judicial", effective as indicated in footnote 2.

<sup>4</sup>P.L. 96-272, §102(b)(1)(C), inserted "such agreement was entered into or", effective as indicated in footnote 2.



would have received such aid in or for such month if application had been made therefor, or (ii) in the case of a child who had been living with a relative specified in section 406(a) within 6 months prior to the month in which such agreement was entered into or<sup>5</sup> such proceedings were initiated, would have received such aid in or for such month if in such month he had been living with (and removed from the home of) such a relative and application had been made therefor;

(b) the term "aid to families with dependent children" shall, notwithstanding section 406(b), include also foster care in behalf of a child described in paragraph (a) of this section—

(1) in the foster family home of any individual, whether the payment therefor is made to such individual or to a public or nonprofit private child-placement or child-care agency, or

(2) in a child-care institution, whether the payment therefor is made to such institution or to a public or nonprofit private child-placement or child-care agency, but subject to limitations prescribed by the Secretary with a view to including as "aid to families with dependent children" in the case of such foster care in such institutions only those items which are included in such term in the case of foster care in the foster family home of an individual;

(c) the number of individuals counted under clause (A) of section 403(a)(1) for any month shall include individuals (not otherwise included under such clause) with respect to whom expenditures were made in such month as aid to families with dependent children in the form of foster care; and

(d) services described in paragraph (f)(2) of this section shall be considered as part of the administration of the State plan for purposes of section 403(a)(3); but only with respect to a State whose State plan approved under section 402—

(e) includes aid for any child described in paragraph (a) of this section, and

(f) includes provision for (1) development of a plan for each such child (including periodic review of the necessity for the child's being in a foster family home or child-care institution) to assure that he receives proper care and that services are provided which are designed to improve the conditions in the home from which he was removed or to otherwise make possible his being placed in the home of a relative specified in section 406(a), and (2) use by the State or local agency administering the State plan, to the maximum extent practicable, in placing such a child in a foster family home or child-care institution, of the services of employees, of the State public-welfare agency referred to in section 522(a) (relating to allotments to States for child welfare services under part 3 of title V) or of any local agency participating in the administration of the plan referred to in such section, who perform functions in the administration of such plan.

For the purposes of this section, the term "foster family home" means a foster family home for children which is licensed by the State in which it is situated or has been approved, by the agency of such State having responsibility for licensing homes of this type, as meeting the standards established for such licensing; and the term "child-care institution" means a nonprofit private child-care institution, or a public child-care institution which accommodates no more than twenty-five children, which is licensed by the State in which it is situated or has been approved, by the agency of such State responsible for licensing or approval of institutions of this type, as meeting the standards established for such licensing; but the term shall not include detention facilities, forestry camps, training schools, or any other facility operated primarily for the detention of children who are determined to be delinquent.<sup>6</sup>

For the purposes of this section, the provisions of subsections (d), (e), (f), and (g) of section 472 shall apply.<sup>7</sup>

## PART B—CHILD-WELFARE SERVICES

### APPROPRIATION

SEC. 420. For the purpose of enabling the United States, through the Secretary, to cooperate with State public welfare agencies in establishing, extending, and strengthening child-welfare services, the following sums are hereby authorized to be appropri-

<sup>5</sup>P.L. 96-272, §102(b)(1)(D), inserted "such agreement was entered into or", effective as indicated in footnote 2.

<sup>6</sup>P.L. 96-272, §101(a)(5)(A), amended the last paragraph [sentence] of section 408 of the Social Security Act, effective with respect to expenditures made on or after June 17, 1980, but subject to the repeal under §101(a)(2)(A) and (B). Formerly, the last sentence read as follows: "For purposes of this section, the term 'foster family home' means a foster family home for children which is licensed by the State in which it is situated or has been approved, by the agency of such State responsible for licensing homes of this type, as meeting the standards established for such licensing; and the term 'child-care institution' means a nonprofit private child-care institution which is licensed by the State in which it is situated or has been approved, by the agency of such State responsible for licensing or approval of institutions of this type, as meeting the standards established for such licensing."

<sup>7</sup>P.L. 96-272, §102(b)(2), added this paragraph, effective only with respect to expenditures made after September 30, 1979, and subject to the repeal of section 408.



**SUPERSEDED PROVISIONS—SOCIAL SECURITY ACT**

240 P.L. 96-272 §421.

337 03/86

ated: \$196,000,000 for the fiscal year ending June 30, 1973, \$211,000,000 for the fiscal year ending June 30, 1974, \$226,000,000 for the fiscal year ending June 30, 1975, \$246,000,000 for the fiscal year ending June 30, 1976, and \$266,000,000 for each fiscal year thereafter.

**ALLOTMENTS TO STATES**

SEC. 421. The sum appropriated pursuant to section 420 for each fiscal year shall be allotted by the Secretary for use by cooperating State public welfare agencies which have plans developed jointly by the State agency and the Secretary, as follows: He shall allot \$70,000 to each State, and shall allot to each State an amount which bears the same ratio to the remainder of the sum so appropriated for such year as the product of (1) the population of such State under the age of 21 and (2) the allotment percentage of such State (as determined under section 423) bears to the sum of the corresponding products of all the States.

**PAYMENT TO STATES**

SEC. 422. (a) From the sums appropriated therefor and the allotment available under this part, the Secretary shall from time to time pay to each State—

(1) that has a plan for child-welfare services which has been developed as provided in this part and which—

(A) provides that (i) the individual or agency designated pursuant to section 2003(d)(1)(C) to administer or supervise the administration of the State's services program will administer or supervise the administration of such plan for child-welfare services and (ii) to the extent that child-welfare services are furnished by the staff of the State agency or local agency administering such plan for child-welfare services, a single organizational unit in such State or local agency, as the case may be, will be responsible for furnishing such child-welfare services,

(B) provides for coordination between the services provided under such plan and the services provided for dependent children under the State plan approved under part A of this title, with a view to provision of welfare and related services which will best promote the welfare of such children and their families, and

(C) provides, with respect to day care services (including the provision of such care) provided under this title—

(i) for cooperative arrangements with the State health authority and the State agency primarily responsible for State supervision of public schools to assure maximum utilization of such agencies in the provision of necessary health services and education for children receiving day care,

(ii) for an advisory committee, to advise the State public welfare agency on the general policy involved in the provision of day care services under the plan, which shall include among its members representatives of other State agencies concerned with day care or services related thereto and persons representative of professional or civic or other public or nonprofit private agencies, organizations, or groups concerned with the provision of day care,

(iii) for such safeguards as may be necessary to assure provision of day care under the plan only in cases in which it is in the best interest of the child and the mother and only in cases in which it is determined, under criteria established by the State, that a need for such care exists; and, in cases in which the family is able to pay part or all of the costs of such care, for payment of such fees as may be reasonable in the light of such ability,

(iv) for giving priority, in determining the existence of need for such day care, to members of low-income or other groups in the population, and to geographical areas, which have the greatest relative need for extension of such day care, and

(v) that day care provided under the plan will be provided only in facilities (including private homes) which are licensed by the State, or approved (as meeting the standards established for such licensing) by the State agency responsible for licensing facilities of this type, and

(vi) for the development and implementation of arrangements for the more effective involvement of the parent or parents in the appropriate care of the child and the improvement of the health and development of the child, and

(2) that makes a satisfactory showing that the State is extending the provision of child-welfare services in the State, with priority being given to communities with the greatest need for such services after giving consideration to their relative financial need, and with a view to making available by July 1, 1975, in all political subdivisions of the State, for all children in need thereof, child-welfare services provided by the staff (which shall to the extent feasible be composed of trained child-welfare personnel) of the State public welfare agency or of the local agency participating in the administration of the plan in the political subdivision, except that (effective July 1, 1969, or, if earlier, on the date as of which the modification of the State plan to comply with this requirement with respect to subprofessional staff is approved) such plan shall provide for the training and effective use of paid subprofessional staff with particular emphasis on the full-time or part-time employment of persons of low income, as community service aides, in the administration of the plan and for the use of nonpaid or partially paid volunteers in providing services and in assisting any advisory committees established by the State agency, an amount equal to the Federal share (as determined under section 423) of the total sum expended under such plan (including the cost of administration of the plan) in meeting the costs of State, district, county, or other local child-welfare services, in developing State services for the encouragement and assistance of adequate methods of community child-welfare organization, in paying the costs of returning any runaway child who has not attained the age of eighteen to his own community in another State, and of maintaining such child until such return (for a period not exceeding fifteen days), in cases in which such costs cannot be met by the parents of such child or by any person, agency, or institution legally responsible for the support of such child. In developing such services for children, the facilities and experience of voluntary agencies shall be utilized in accordance with child-care programs and arrangements in the State and local communities as may be authorized by the State.

(b) The method of computing and paying such amounts shall be as follows:

(1) The Secretary shall, prior to the beginning of each period for which a payment is to be made, estimate the amount to be paid to the State for such period under the provisions of subsection (a).

(2) From the allotment available therefor, the Secretary shall pay the amount so estimated, reduced or increased, as the case may be, by any sum (not previously adjusted under this section) by which he finds that his estimate of the amount to be paid the State for any prior period under this section was greater or less than the amount which should have been paid to the State for such prior period under this section.

(c) If on December 1, 1974, the agency of a State administering its plan under this part was not the agency designated pursuant to section 402(a)(3), subsection (a)(1)(A) of this section shall not apply with respect to such agency but only so long as such agency is not the agency designated under section 2003(d)(1)(C), and if on December 1, 1974, the local agency administering the plan of a State under this part in a subdivision of the State is not the local agency in such subdivision administering the plan of such State under part A of this title, subsection (a)(1)(A) of this section shall not apply with respect to such local agency but only so long as such local agency is not the local agency administering the program of the State for the provision of services under title XX.

#### ALLOTMENT PERCENTAGE AND FEDERAL SHARE

SEC. 423. (a) The "allotment percentage" for any State shall be 100 per centum less the State percentage; and the State percentage shall be that percentage which bears the same ratio to 50 per centum as the per capita income of such State bears to the per capita income of the United States; except that (1) the allotment percentage shall in no case be less than 30 per centum or more than 70 per centum, and (2) the allotment percentage shall be 70 per centum in the case of Puerto Rico, the Virgin Islands, and Guam.

(b) The "Federal share" for any State for any fiscal year shall be 100 per centum less that percentage which bears the same ratio to 50 per centum as the per capita income of such State bears to the per capita income of the United States, except that (1) in no case shall the Federal share be less than  $33 \frac{1}{3}$  per centum or more than  $66 \frac{2}{3}$  per centum, and (2) the Federal share shall be  $66 \frac{2}{3}$  per centum in the case of Puerto Rico, the Virgin Islands, and Guam.

(c) The Federal share and the allotment percentage for each State shall be promulgated by the Secretary between October 1 and November 30 of each even-numbered year, on the basis of the average per capita income of each State and of the United States for the three most recent calendar years for which satisfactory data are



available from the Department of Commerce. Such promulgation shall be conclusive for each of the two fiscal years in the period beginning October 1 next succeeding such promulgation: *Provided*, That the Federal shares and allotment percentages promulgated under section 524(c) of the Social Security Act in 1966 shall be effective for purposes of this section for the fiscal years ending June 30, 1968, and June 30, 1969.

(d) For purposes of this section, the term "United States" means the fifty States and the District of Columbia.

#### REALLOTMENT

SEC. 424. The amount of any allotment to a State under section 421 for any fiscal year which the State certifies to the Secretary will not be required for carrying out the State plan developed as provided in such section shall be available for reallocation from time to time, on such dates as the Secretary may fix, to other States which the Secretary determines (1) have need in carrying out their State plans so developed for sums in excess of those previously allotted to them under that section and (2) will be able to use such excess amounts during such fiscal year. Such reallocations shall be made on the basis of the State plans so developed, after taking into consideration the population under the age of twenty-one, and the per capita income of each such State as compared with the population under the age of twenty-one, and the per capita income of all such States with respect to which such a determination by the Secretary has been made. Any amount so reallocated to a State shall be deemed part of its allotment under section 421.

#### DEFINITION

SEC. 425. For purposes of this title, the term "child-welfare services" means public social services which supplement, or substitute for, parental care and supervision for the purpose of (1) preventing or remedying, or assisting in the solution of problems which may result in, the neglect, abuse, exploitation, or delinquency of children, (2) protecting and caring for homeless, dependent, or neglected children, (3) protecting and promoting the welfare of children of working mothers, and (4) otherwise protecting and promoting the welfare of children, including the strengthening of their own homes where possible or, where needed, the provision of adequate care of children away from their homes in foster family homes or day-care or other child-care facilities.

SEC. 2002. (a)

(2)(A)

(ii) The amount specified for purposes of clause (i) is \$2,500,000,000 for fiscal years prior to fiscal year 1979, \$2,700,000,000 for fiscal year 1979, and \$2,500,000,000 for fiscal years after fiscal year 1979.

(D)\* Each State with respect to which a limitation is promulgated under subparagraph (A) for any fiscal year shall, at the earliest practicable date after the commencement of such fiscal year (and in accordance with regulations prescribed by the Secretary), certify to the Secretary whether the amount of its limitation is greater or less than the amount needed by the State, for uses to which the limitation applies, for such fiscal year and, if so, the amount by which the amount of such limitation is greater or less than such need.

(E)\* If any State certifies, in accordance with subparagraph (D)\*, that the amount of its limitation for any fiscal year is greater than its need for such year, then the amount of the limitation of such State for such year shall be reduced by the excess of its limitation amount over its need, and the amount of such reduction shall be available for allotment as provided in subparagraph (F)<sup>11</sup>.

(F) The amounts made available pursuant to subparagraph (E) for allotment in fiscal year 1980 shall be allotted by the Secretary to the States which have certified under subparagraph (D) that the amounts of their limitations for such fiscal year are less than their need for such year. The amount of such allotment to any State (which shall be in addition to any payments made to the State under subparagraph (A)) shall bear the same ratio to the total amount available for allotment in such year under this subparagraph as the population of such State bears to the population of the fifty States and the District of Columbia, but shall in no case exceed the amount by which such State certified that its limitation is less than its need for such fiscal year.<sup>12</sup>

\*P.L. 96-272, §201(c)(1), with respect to fiscal year 1980 only, continued this subparagraph in effect, redesignated as subparagraph (D).

\*P.L. 96-272, §201(c)(1), with respect to fiscal year 1980 only, continued this subparagraph in effect, redesignated as subparagraph (E).

<sup>10</sup>P.L. 96-272, §201(c)(2), with respect to fiscal year 1980 only, struck out "(B)" and substituted "(D)".

<sup>11</sup>P.L. 96-272, §201(c)(2), with respect to fiscal year 1980 only, struck out "(D)" and substituted "(F)".

<sup>12</sup>P.L. 96-272, §201(c)(3), effective with respect to fiscal year 1980 only, amended subparagraph (F) in its entirety. P.L. 96-272, §201(c), effective with respect to fiscal year 1980 only, redesignated the former subparagraph (D) as



## SEC. 2004.

(1) the beginning of the fiscal year of either the Federal Government or the State government is established as the beginning of the State's services program year; and

**Provisions of the Social Security Act as in Effect Prior to  
P.L. 96-403, Approved October 9, 1980 (94 Stat. 1709)  
[Social Security Tax Receipts—Allocation]**

## SEC. 201.

(b)

(1) (H) 1.50 per centum of the wages (as so defined) paid after December 31, 1978, and before January 1, 1981, and so reported, (I) 1.65 per centum of the wages (as so defined) paid after December 31, 1980, and before January 1, 1985, and so reported, (J) 1.90 per centum of the wages (as so defined) paid after December 31, 1984, and before January 1, 1990, and so reported, and (K) 2.20 per centum of the wages (as so defined) paid after December 31, 1989, and so reported.

(2) (H) 1.0400 per centum of the amount of self-employment income (as so defined) so reported for any taxable year beginning after December 31, 1978, and before January 1, 1981, (I) 1.2375 per centum of the amount of self-employment income (as so defined) so reported for any taxable year beginning after December 31, 1980, and before January 1, 1985, (J) 1.4250 per centum of the amount of self-employment income (as so defined) so reported for any taxable year beginning after December 31, 1984, and before January 1, 1990, and (K) 1.650 per centum of the amount of self-employment income (as so defined) so reported for any taxable year beginning after December 31, 1989,

**Provisions of the Social Security Act as in Effect Prior to  
P.L. 96-473, Approved October 19, 1980 (94 Stat. 2263)  
[Social Security Act Retirement Test Amendment]**

## SEC. 203.

(f)

(5)

(D) In the case of an individual—

(i) who has attained the age of 65 on or before the last day of the taxable year, and

(ii) who shows to the satisfaction of the Secretary that he is receiving royalties attributable to a copyright or patent obtained before the taxable year in which he attained the age of 65 and that the property to which the copyright or patent relates was created by his own personal efforts, there shall be excluded from gross income any such royalties.

## SEC. 304. (a)

(2) makes a finding with respect to a State under subsection (b), (c), or (d) of section 303,

subparagraph (F). As so redesignated subparagraph (F) read as follows:

"(F) Of the amounts made available, pursuant to subparagraph (C), for allotment for any fiscal year, the Secretary (i)\* shall allot to the jurisdiction of Puerto Rico \$15,000,000, to the jurisdiction of Guam \$5,000,000, and to the jurisdiction of the Virgin Islands \$500,000, which shall be available to each such jurisdiction in addition to amounts available under section 1108 for purposes of matching the expenditures of such jurisdictions for services pursuant to sections 3(a)(4) and (5), 403(a)(3), 1003(a)(3) and (4), 1403(a)(3) and (4), and 1603(a)(4) and (5): *Provided*, That if the amounts made available, pursuant to subparagraph (C), are insufficient to meet the requirements of this clause, then such amounts as are available shall be allotted to each of the three jurisdictions in proportion to their respective populations."

\*As in original. (P.L. 93-647, §2).

**Provision Deemed to be in Social Security Act as in Effect Prior to  
November 18, 1980 (45 Federal Register 76252)**

**【Cost-of-Living Increase; Extension】**

SEC. 215.

(a)

**TABLE FOR DETERMINING PRIMARY INSURANCE AMOUNT AND MAXIMUM FAMILY  
BENEFITS BEGINNING JANUARY 1980<sup>1</sup>**

I (Primary insurance benefit under 1939 Act, as modified)		II (Primary insurance amount ef- fective for June 1978)	III (Average monthly wage)		IV (Primary insurance amount)	V (Maximum family ben- efits)
If an individual's primary insurance benefit (as deter- mined under subsec. (d)) is—		Or his pri- mary insur- ance amount (as determined under sub- sec. (c)) is—	Or his average monthly wage (as de- termined under sub- sec. (b)) is—		The amount referred to in the pre- ceding para- graphs of this sub- section shall be—	And the maximum amount of benefits payable (as provided in sec. 203(a)) on the basis of his wages and self- employ- ment in- come shall be—
At least—	But not more than—		At least—	But not more than—		
			1911	1915	860.90	1506.60
			1916	1920	861.90	1508.40
			1921	1925	862.90	1510.10
			1926	1930	863.90	1511.90
			1931	1935	864.90	1513.60
			1936	1940	865.90	1515.40
			1941	1945	866.90	1517.10
			1946	1950	867.90	1518.90
			1951	1955	868.90	1520.60
			1956	1960	869.90	1522.40
			1961	1965	870.90	1524.10
			1966	1970	871.90	1525.90
			1971	1975	872.90	1527.60
			1976	1980	873.90	1529.40
			1981	1985	874.90	1531.10
			1986	1990	875.90	1532.90
			1991	1995	876.90	1534.60
			1996	2000	877.90	1536.40
			2001	2005	878.90	1538.10
			2006	2010	879.90	1539.90
			2011	2015	880.90	1541.60
			2016	2020	881.90	1543.40
			2021	2025	882.90	1545.10
			2026	2030	883.90	1546.90
			2031	2035	884.90	1548.60
			2036	2040	885.90	1550.40
			2041	2045	886.90	1552.10
			2046	2050	887.90	1553.90
			2051	2055	888.90	1555.60
			2056	2060	889.90	1557.40
			2061	2065	890.90	1559.10
			2066	2070	891.90	1560.90
			2071	2075	892.90	1562.60
			2076	2080	893.90	1564.40
			2081	2085	894.90	1566.10
			2086	2090	895.90	1567.90
			2091	2095	896.90	1569.60
			2096	2100	897.90	1571.40
			2101	2105	898.90	1573.10

## SUPERSEDED PROVISIONS—SOCIAL SECURITY ACT

337 03/86

P.L. 96-499 §1155. 245

I (Primary insurance benefit under 1939 Act, as modified)		II (Primary insurance amount effective for June 1978)	III (Average monthly wage)		IV (Primary insurance amount)	V (Maximum family benefits)
If an individual's primary insurance benefit (as determined under subsec. (d)) is—		Or his primary insurance amount (as determined under subsec. (c)) is—	Or his average monthly wage (as determined under subsec. (b)) is—		The amount referred to in the preceding paragraphs of this subsection shall be—	And the maximum amount of benefits payable (as provided in sec. 203(a)) on the basis of his wages and self-employment income shall be—
At least—	But not more than—		At least—	But not more than—		
			2106	2110	899.90	1574.90
			2111	2115	900.90	1576.60
			2116	2120	901.90	1578.40
			2121	2125	902.90	1580.10
			2126	2130	903.90	1581.90
			2131	2135	904.90	1583.60
			2136	2140	905.90	1585.40
			2141	2145	906.90	1587.10
			2146	2150	907.90	1588.90
			2151	2155	908.90	1590.60
			2156	2160	909.90	1592.40

<sup>1</sup>This extension was published at 44 FR 62956, November 1, 1979. This data was prepared and published as required by Social Security Act §215(a)(5) and §215(i)(2)(D).

**Provisions of the Social Security Act as in Effect Prior to  
P.L. 96-499, Approved December 5, 1980 (94 Stat. 2599)  
Omnibus Reconciliation Act of 1980**

## SEC. 209.

(f) The payment by an employer (without deduction from the remuneration of the employee) (1) of the tax imposed upon an employee under section 1400 of the Internal Revenue Code, or (2) of any payment required from an employee under a State unemployment compensation law;

## SEC. 1124. (a)

(3)

(A)

(ii) is the owner (in whole or in part) of an interest of 5 per centum or more in any mortgage, deed of trust, note, or other obligation secured (in whole or in part) by the entity or any of the property or assets thereof; or

## SEC. 1155. (a)

(2) Each Professional Standards Review Organization shall have the authority to determine, in advance, in the case of—

(A) any elective admission to a hospital, or other health care facility, or

(B) any other health care service which will consist of extended or costly courses of treatment,

whether such service, if provided, or if provided by a particular health care practitioner or by a particular hospital or other health care facility, organization, or agency, would meet the criteria specified in clauses (A) and (C) of paragraph (1).

(g)(1) Where a Professional Standards Review Organization (whether designated on a conditional basis or otherwise) requests review responsibility with respect to services furnished in shared health facilities, the Secretary must give priority to such request, with the highest priority being assigned to requests from organizations located in areas with substantial numbers of shared health facilities.



(2) The Secretary shall require any Professional Standards Review Organization which is capable of exercising review responsibility with respect to ambulatory care services to perform review responsibility with respect to such services on and after a date not earlier than the date the organization is designated as a Professional Standards Review Organization (other than under section 1154) and not later than two years after the date the organization has been so designated, but any such designated Professional Standards Review Organization may be approved to perform such review responsibility at any earlier time if such organization applies for, and is found capable of exercising, such responsibility.

SEC. 1812. (a)

(3) post-hospital home health services for up to 100 visits (during the one-year period described in section 1861(n)) after the beginning of one spell of illness and before the beginning of the next.

(d) Payment under this part may be made for post-hospital home health services furnished an individual only during the one-year period described in section 1861(n) following his most recent hospital discharge which meets the requirements of such section, and only for the first 100 visits in such period. The number of visits to be charged for purposes of the limitation in the preceding sentence, in connection with items or services described in section 1861(m), shall be determined in accordance with regulations.

SEC. 1814. (a)

(2)

(E) in the case of inpatient hospital services in connection with the care, treatment, filling, removal, or replacement of teeth or structures directly supporting teeth, the individual, because of his underlying medical condition and clinical status, requires hospitalization in connection with the provision of such dental services; or<sup>1</sup>

Payment for Posthospital Extended Care Services

(h)(1) An individual shall be presumed to require the care specified in subsection (a)(2)(C) of this section for purposes of making payment to a skilled nursing facility (subject to the provisions of section 1812) for posthospital extended care services which are furnished by such facility to such individual if—

(A) the certification referred to in subsection (a)(2)(C) of this section is submitted prior to or at the time of admission of such individual to such skilled nursing facility,

(B) such certification states that the medical condition of the individual is a condition designated in regulations,

(C) such certification is accompanied by a plan of treatment for providing such services, and

(D) there is compliance with such other requirements and procedures as may be specified in regulations,

but only for services furnished during such limited periods of time with respect to such conditions of the individual as may be prescribed in regulations by the Secretary, taking into account the medical severity of such conditions, the degree of incapacity, and the minimum length of stay in an institution generally needed for such conditions, and such other factors affecting the type of care to be provided as the Secretary deems pertinent.

(2) If the Secretary determines with respect to a physician that such physician is submitting with some frequency (A) erroneous certifications that individuals have conditions designated in regulations as provided in this subsection or (B) plans for providing services which are inappropriate, the provisions of paragraph (1) shall not apply, after the effective date of such determination, in any case in which such physician submits a certification or plan referred to in subparagraph (A), (B), or (C) of paragraph (1).

Payment for Posthospital Home Health Services

(i)(1) An individual shall be presumed to require the services specified in subsection (a)(2)(D) of this section for purposes of making payment to a home health agency (subject to the provisions of section 1812) for posthospital home health services furnished by such agency to such individual if—

(A) the certification and plan referred to in subsection (a)(2)(D) of this section are submitted in timely fashion prior to the first visit by such agency,

(B) such certification states that the medical condition of the individual is a condition designated in regulations, and

<sup>1</sup>P.L. 96-499, §931(b), inserted "or".

(C) there is compliance with such other requirements and procedures as may be specified in regulations, but only for services furnished during such limited numbers of visits with respect to such conditions of the individual as may be prescribed in regulations by the Secretary, taking into account the medical severity of such conditions, the degree of incapacity, and the minimum period of home confinement generally needed for such conditions, and such other factors affecting the type of care to be provided as the Secretary deems pertinent.

(2) If the Secretary determines with respect to a physician that such physician is submitting with some frequency (A) erroneous certifications that individuals have conditions designated in regulations as provided in this subsection or (B) plans for providing services which are inappropriate, the provisions of paragraph (1) shall not apply, after the effective date of such determination, in any case in which such physician submits a certification or plan referred to in subparagraph (A) or (B) of paragraph (1).

#### SEC. 1833. (a)

(2) in the case of services described in section 1832(a)(2) (except those services described in subparagraph (D) of section 1832(a)(2))—with respect to home health services, 100 percent, and with respect to other services (unless otherwise specified in section 1881), 80 percent.<sup>2</sup> of—

(A) the lesser of (i) the reasonable cost of such services, as determined under section 1861(v), or (ii) the customary charges with respect to such services; or

(B) if such services are furnished by a public provider of services free of charge or at nominal charges to the public, the amount determined in accordance with section 1814(b)(2); or

(C) if such services are services to which the next to last sentence of section 1861(p) applies, the reasonable charges for such services, and

(3) in the case of services described in section 1832(a)(2)(D), 80 percent of costs which are reasonable and related to the cost of furnishing such services or on such other tests of reasonableness as the Secretary may prescribe in regulations, including those authorized under section 1861(v)(1)(A).

#### LIMITATION ON HOME HEALTH SERVICES

SEC. 1834. (a) Payment under this part may be made for home health services furnished an individual during any calendar year only for 100 visits during such year. The number of visits to be charged for purposes of the limitation in the preceding sentence, in connection with items and services described in section 1861(m), shall be determined in accordance with regulations.

(b) For purposes of subsection (a), home health services shall be taken into account only if payment under this part is or would be, except for this section or the failure to comply with the request and certification requirements of or under section 1835(a), made with respect to such services.

#### SEC. 1837.

(b) No individual may enroll under this part more than twice.

(e) There shall be a general enrollment period, after the period described in subsection (c), during the period beginning on January 1 and ending on March 31 of each year beginning with 1969.

#### SEC. 1839.

(d) (2) the months which elapsed between the date of the termination of his first coverage period and the close of the enrollment period in which he enrolled for the second time

#### SEC. 1843.

(g)

(2)

(C) notwithstanding subsection (e), in the case of any termination described in such subsection, such individual may terminate his enrollment under this part by the filing of a notice, before the close of the third month which begins after the date of such termination, that he no longer wishes to participate in the insurance program established by this part (and in such a case, the termination of his coverage period under this part shall take effect as of the close of such third month).

<sup>2</sup>As in original. Period should be stricken.



## SEC. 1861.

(b)

(7) a physician where the hospital has a teaching program approved as specified in paragraph (6), unless (A) such inpatient is a private patient (as defined in regulations), or (B) the hospital establishes that during the two-year period ending December 31, 1967, and each year thereafter all inpatients have been regularly billed by the hospital for services rendered by physicians and reasonable efforts have been made to collect in full from all patients and payment of reasonable charges (including applicable deductibles and coinsurance) has been regularly collected in full or in substantial part from at least 50 percent of all inpatients.

(i) (B) within 28 days after such discharge, in the case of an individual who was unable to be admitted to a skilled nursing facility within such 30<sup>3</sup> days because of a shortage of appropriate bed space in the geographic area in which he resides, or

## Post-Hospital Home Health Services

(n) The term "post-hospital home health services" means home health services furnished an individual within one year after his most recent discharge from a hospital of which he was an inpatient for not less than 3 consecutive days or (if later) within one year after his most recent discharge from a skilled nursing facility of which he was an inpatient entitled to payment under part A for post-hospital extended care services, but only if the plan covering the home health services (as described in subsection (m)) is established within 14 days after his discharge from such hospital or skilled nursing facility.

(r) (2) a doctor of dentistry or of dental or oral surgery who is legally authorized to practice dentistry by the State in which he performs such function but only with respect to (A) surgery related to the jaw or any structure contiguous to the jaw or (B) the reduction of any fracture of the jaw or any facial bone, or (C) the certification required by section 1814(a)(2)(E) of this Act, (3) except for the purposes of section 1814(a), section 1835, and subsections (j), (k), (m), and (o) of this section, a doctor of podiatry or surgical chiropody, but (unless clause (1) of this subsection also applies to him) only with respect to functions which he is legally authorized to perform as such by the State in which he performs them,

## SEC. 1862.

(e)(1) Whenever the Secretary determines that a physician or other individual practitioner has been convicted (on or after the date of the enactment of this subsection, or within such period prior to that date as the Secretary shall specify in regulations) of a criminal offense related to such physician's or practitioner's involvement in the programs under this title or the program under title XIX, the Secretary shall suspend such physician or practitioner from participation in the program under this title for such period as he may deem appropriate; and no payment may be made under this title with respect to any item or service furnished by such physician or practitioner during the period of such suspension. The provisions of paragraphs (2) and (3) of subsection (d) shall apply with respect to determinations made by the Secretary under this subsection.

(2) In any case where the Secretary under paragraph (1) suspends any physician or other individual practitioner from participation in the program under this title, he shall—

(A) promptly notify each single State agency which administers or supervises the administration of a State plan approved under title XIX of the fact, circumstances, and period of such suspension; and

(B) promptly notify the appropriate State or local agency or authority having responsibility for the licensing or certification of such physician or practitioner of the fact and circumstances of such suspension, request that appropriate investigations be made and sanctions invoked in accordance with applicable State law and policy, and request that such State or local agency or authority keep the Secretary and the Inspector General of the Department of Health, Education, and Welfare fully and currently informed with respect to any actions taken in response to such request.

## SEC. 1870.

(f) If an individual who received medical and other health services for which payment may be made under section 1832(a)(1) dies, and—

(1) no assignment of the right to payments was made by such individual before his death, and

(2) payment for such services has not been made,



payment for such services shall be made to the physician or other person who provided such services, but payment such be made under this subsection only in such amount and subject to such conditions as would have been applicable if the individual who received the services had not died, and only if the person or persons who provided the services agrees that the reasonable charge is the full charge for the services.

## SEC. 1902. (a)

(13)

(E) effective July 1, 1976, for payment (except where the State agency is subject to an order under section 1914)\* of the skilled nursing facility and intermediate care facility services provided under the plan on a reasonable cost related basis, as determined in accordance with methods and standards which shall be developed by the State on the basis of cost-finding methods approved and verified by the Secretary; and

(35) provide that any intermediate care facility receiving payments under such plan complies with the requirements of section 1124;

(39) provide that, subject to subsection (g), whenever the single State agency which administers or supervises the administration of the State plan is notified by the Secretary under section 1862(e)(2)(A) that a physician or other individual practitioner has been suspended from participation in the program under title XVIII, the agency shall promptly suspend such physician or practitioner from participation in the plan for not less than the period specified in such notice, and no payment may be made under the plan with respect to any item or service furnished by such physician or practitioner during the period of the suspension under this title;

(g) The Secretary may waive suspension under subsection (a)(39) of a physician's or practitioner's participation in a State plan approved under this title and of the prohibition under such subsection of payment for any item or service furnished by him during the period of such suspension, if the single State agency which administers or supervises the administration of the plan submits a request to the Secretary for such waiver and if the Secretary approves such request.

## SEC. 1903.

(j)(1) Notwithstanding the preceding provisions of this section, no payment shall be made to a State (except as provided under this subsection) with respect to expenditures incurred by it for services provided by any institution during any period that an order for suspension of payment (as authorized by this subsection) is effective with respect to such institution.

(2) The Secretary may issue a suspension of payment order with respect to any institution if—

(A) such institution (i) does not (at the time such order is issued) have in effect an agreement with the Secretary which is entered into pursuant to section 1866; and (ii) did (prior to the time such order is issued) have in effect such an agreement; and

(B)(i) the Secretary has been unable to collect (or make satisfactory arrangement for the collection of) amounts due on account of overpayments made to such institution under title XVIII; or

(ii) the Secretary has been unable to obtain from such institution the data and information necessary to enable him to determine the amount (if any) of the overpayments made to such institution under title XVIII.

(3) Whenever the Secretary issues any order for suspension of payment under this subsection with respect to any institution, he shall submit a notice of such order to the single State agency (referred to in section 1902(a)(5)) of each State which he has reason to believe does or may utilize the services of such institution in providing medical assistance under a plan approved under this title.

(4) Any order for suspension of payment issued with respect to any institution under this subsection shall become effective, in the case of any state<sup>5</sup> plan approved under this title, on the 60th day after the date the State agency (referred to in section 1902(a)(5)) administering or supervising the administration of such plan receives notice of such order submitted pursuant to paragraph (3). Any such order shall cease to be effective at such time as the Secretary is satisfied that the institution is participating in substantial negotiations which seek to remedy the conditions which gave rise to his order of suspension of payments, or that the amounts (referred to in paragraph (2)) are no longer due from such institution or that a satisfactory arrangement has been made for the payment by such institution of any such amounts. Upon the determination of

\*P.L. 96-499 §905(a), added "(except where the State agency is subject to an order under section 1914)", effective December 5, 1980.

<sup>5</sup>As in original. "State" usually capitalized.

the Secretary that any such order with respect to any such institution shall cease to be effective, he shall forthwith notify each State agency to which he has theretofore submitted notice under paragraph (3) with respect to such institution.

(5) Whenever any order which has been issued by the Secretary under the preceding provisions of this subsection with respect to an institution ceases to be effective, any payment to which any State would (except for the preceding provisions of this subsection) have been entitled under this section on account of services provided by such institution shall be made to such State for the month in which such order ceases to be effective.

**Provision of the Social Security Act as in Effect Prior to  
May 15, 1981 (46 Federal Register 27076)  
[Cost-of-Living Increase]**

SEC. 215.

(a)

**TABLE 1.—TABLE FOR DETERMINING PRIMARY INSURANCE AMOUNT AND MAXIMUM  
FAMILY BENEFITS BEGINNING JUNE 1980<sup>1</sup>**

I (Primary insurance benefit under 1939 Act, as modified)		II (Primary insurance amount ef- fective for June 1979)	III (Average monthly wage)		IV (Primary insurance amount)	V (Maximum family ben- efits)
If an individual's primary insurance benefit (as deter- mined under subsec. (d)) is—		Or his pri- mary insur- ance amount (as determined under sub- sec. (c)) is—	Or his average monthly wage (as de- termined under sub- sec. (b)) is—		The amount referred to in the pre- ceding para- graphs of this sub- section shall be—	And the maximum amount of benefits payable (as provided in sec. 203(a)) on the basis of his wages and self- employ- ment in- come shall be—
At least—	But not more than—		At least—	But not more than—		
	\$16.20	\$133.90		\$76	\$153.10	\$229.70
\$16.21	16.84	136.00	\$77	78	155.50	233.30
16.85	17.60	139.20	79	80	159.20	238.80
17.61	18.40	141.70	81	81	162.00	243.20
18.41	19.24	144.20	82	83	164.90	247.40
19.25	20.00	147.30	84	85	168.40	252.70
20.01	20.64	150.10	86	87	171.60	257.50
20.65	21.28	152.40	88	89	174.20	261.30
21.29	21.88	155.40	90	90	177.70	266.60
21.89	22.28	158.10	91	92	180.80	271.20
22.29	22.68	160.70	93	94	183.70	275.60
22.69	23.08	163.30	95	96	186.70	280.10
23.09	23.44	166.30	97	97	190.10	285.20
23.45	23.76	169.00	98	99	193.20	289.80
23.77	24.20	172.30	100	101	197.00	295.50
24.21	24.60	174.70	102	102	199.70	299.70
24.61	25.00	177.60	103	104	203.00	304.50
25.01	25.48	180.90	105	106	206.80	310.30
25.49	25.92	183.90	107	107	210.20	315.40
25.93	26.40	186.70	108	109	213.40	320.20
26.41	26.94	189.60	110	113	216.80	325.20
26.95	27.46	192.30	114	118	219.80	329.80
27.47	28.00	195.20	119	122	223.20	334.80
28.01	28.68	198.30	123	127	226.70	340.10

## SUPERSEDED PROVISIONS—SOCIAL SECURITY ACT

337 03/86

46 FR 27076

251

I (Primary insurance benefit under 1939 Act, as modified)		II (Primary insurance amount ef- fective for June 1979)	III (Average monthly wage)		IV (Primary insurance amount)	V (Maximum family ben- efits)
If an individual's primary insurance benefit (as deter- mined under subsec. (d)) is—		Or his pri- mary insur- ance amount (as determined under sub- sec. (c)) is—	Or his average monthly wage (as de- termined under sub- sec. (b)) is—		The amount referred to in the pre- ceding para- graphs of this sub- section shall be—	And the maximum amount of benefits payable (as provided in sec. 203(a)) on the basis of his wages and self- employ- ment in- come shall be—
At least—	But not more than—		At least—	But not more than—		
28.69	29.25	201.20	128	132	230.00	345.00
29.26	29.68	203.90	133	136	233.10	349.70
29.69	30.36	206.70	137	141	236.30	354.50
30.37	30.92	209.70	142	146	239.70	359.60
30.93	31.36	212.80	147	150	243.30	365.00
31.37	32.00	215.30	151	155	246.10	369.20
32.01	32.60	218.40	156	160	249.70	374.60
32.61	33.20	221.30	161	164	253.00	379.50
33.21	33.88	224.10	165	169	256.20	384.30
33.89	34.50	227.20	170	174	259.70	389.60
34.51	35.00	229.90	175	178	262.80	394.30
35.01	35.80	232.90	179	183	266.30	399.50
35.81	36.40	235.70	184	188	269.50	404.30
36.41	37.08	238.80	189	193	273.00	409.60
37.09	37.60	241.70	194	197	276.30	414.50
37.61	38.20	244.50	198	202	279.50	419.30
38.21	39.12	247.70	203	207	283.20	424.80
39.13	39.68	250.60	208	211	286.50	429.80
39.69	40.33	252.90	212	216	289.10	433.70
40.34	41.12	256.10	217	221	292.80	439.20
41.13	41.76	259.00	222	225	296.10	444.20
41.77	42.44	262.20	226	230	299.70	449.60
42.45	43.20	265.00	231	235	302.90	454.50
43.21	43.76	268.20	236	239	306.60	460.00
43.77	44.44	270.70	240	244	309.50	466.30
44.45	44.88	273.40	245	249	312.50	476.00
44.89	45.60	276.80	250	253	316.40	483.70
		279.50	254	258	319.50	493.10
		281.90	259	263	322.30	502.50
		285.40	264	267	326.30	510.10
		288.10	268	272	329.30	519.80
		291.20	273	277	332.90	529.10
		293.90	278	281	336.00	536.70
		296.80	282	286	339.30	546.40
		300.00	287	291	342.90	556.10
		302.40	292	295	345.70	563.50
		305.70	296	300	349.50	573.00
		308.50	301	305	352.70	582.80
		311.20	306	309	355.80	590.30
		314.40	310	314	359.40	599.80
		316.90	315	319	362.30	609.50
		319.90	320	323	365.70	617.00
		322.90	324	328	369.10	626.50
		325.60	329	333	372.20	636.00
		329.00	334	337	376.10	643.90
		331.30	338	342	378.70	653.20
		334.40	343	347	382.30	662.80



I (Primary insurance benefit under 1939 Act, as modified)		II (Primary insurance amount ef- fective for June 1979)	III (Average monthly wage)		IV (Primary insurance amount)	V (Maximum family ben- efits)
If an individual's primary insurance benefit (as deter- mined under subsec. (d)) is—		Or his pri- mary insur- ance amount (as determined under subsec. (c)) is—	Or his average monthly wage (as de- termined under sub- sec. (b)) is—		The amount referred to in the pre- ceding para- graphs of this sub- section shall be—	And the maximum amount of benefits payable (as provided in sec. 203(a)) on the basis of his wages and self- employ- ment in- come shall be—
At least—	But not more than—		At least—	But not more than—		
		337.60	348	351	385.90	670.40
		340.10	352	356	388.80	679.90
		343.40	357	361	392.60	689.50
		346.10	362	365	395.60	697.20
		348.80	366	370	398.70	706.70
		351.90	371	375	402.30	716.00
		354.90	376	379	405.70	724.00
		357.90	380	384	409.10	733.60
		360.50	385	389	412.10	742.90
		363.30	390	393	415.30	750.50
		366.50	394	398	419.00	760.30
		369.30	399	403	422.20	769.70
		372.50	404	407	425.80	777.20
		374.90	408	412	428.60	786.90
		377.60	413	417	431.60	796.30
		380.30	418	421	434.70	803.90
		383.30	422	426	438.20	813.50
		385.90	427	431	441.10	823.00
		388.20	432	436	443.80	832.60
		391.50	437	440	447.50	836.40
		393.90	441	445	450.30	841.40
		396.60	446	450	453.40	846.00
		399.50	451	454	456.70	849.60
		402.20	455	459	459.80	854.40
		404.80	460	464	462.70	859.00
		407.30	465	468	465.60	863.20
		410.50	469	473	469.30	867.80
		412.80	474	478	471.90	872.60
		415.50	479	482	475.00	876.50
		418.40	483	487	478.30	881.40
		421.10	488	492	481.40	886.20
		423.70	493	496	484.30	890.00
		426.70	497	501	487.80	894.60
		429.20	502	506	490.60	899.20
		431.80	507	510	493.60	903.20
		434.50	511	515	496.70	908.00
		437.50	516	520	500.10	913.00
		440.00	521	524	503.00	916.50
		442.60	525	529	505.90	921.40
		445.80	530	534	509.60	926.00
		448.10	535	538	512.20	929.90
		450.90	539	543	515.40	934.80
		453.70	544	548	518.60	939.50
		456.50	549	553	521.80	944.30
		459.00	554	556	524.70	947.10
		461.20	557	560	527.20	950.90
		463.70	561	563	530.10	953.90

## SUPERSEDED PROVISIONS—SOCIAL SECURITY ACT

337 03/86

46 FR 27076

253

I (Primary insurance benefit under 1939 Act, as modified)		II (Primary insurance amount effective for June 1979)	III (Average monthly wage)		IV (Primary insurance amount)	V (Maximum family benefits)
If an individual's primary insurance benefit (as determined under subsec. (d)) is—		Or his primary insurance amount (as determined under subsec. (c)) is—	Or his average monthly wage (as determined under subsec. (b)) is—		The amount referred to in the preceding paragraphs of this subsection shall be—	And the maximum amount of benefits payable (as provided in sec. 203(a)) on the basis of his wages and self-employment income shall be—
At least—	But not more than—		At least—	But not more than—		
		466.10	564	567	532.80	957.70
		468.80	568	570	535.90	960.40
		471.00	571	574	538.40	964.20
		473.40	575	577	541.10	967.30
		475.60	578	581	543.70	970.90
		478.10	582	584	546.50	973.90
		480.20	585	588	548.90	977.70
		483.10	589	591	552.20	980.50
		485.40	592	595	554.90	984.30
		487.80	596	598	557.60	986.90
		490.20	599	602	560.30	991.10
		492.50	603	605	563.00	993.90
		494.90	606	609	565.70	997.50
		497.50	610	612	568.70	1000.60
		499.80	613	616	571.30	1004.40
		502.10	617	620	574.00	1008.20
		504.60	621	623	576.80	1011.00
		506.90	624	627	579.40	1014.90
		509.30	628	630	582.20	1018.50
		511.70	631	634	584.90	1023.50
		514.20	635	637	587.80	1028.30
		516.70	638	641	590.60	1033.20
		518.90	642	644	593.20	1037.80
		521.40	645	648	596.00	1042.80
		523.70	649	652	598.60	1047.40
		525.20	653	656	600.40	1050.40
		526.70	657	660	602.10	1053.30
		528.60	661	665	604.20	1057.20
		530.40	666	670	606.30	1061.00
		532.40	671	675	608.60	1064.50
		534.30	676	680	610.80	1068.40
		536.10	681	685	612.80	1072.20
		538.20	686	690	615.20	1075.80
		539.90	691	695	617.20	1080.00
		541.70	696	700	619.20	1083.60
		543.70	701	705	621.50	1087.40
		545.60	706	710	623.70	1091.20
		547.60	711	715	626.00	1094.80
		549.50	716	720	628.10	1098.70
		551.40	721	725	630.30	1102.50
		553.30	726	730	632.50	1106.40
		555.20	731	735	634.60	1110.20
		557.10	736	740	636.80	1113.90
		558.90	741	745	638.90	1117.90
		560.60	746	750	640.80	1121.40
		562.40	751	755	642.90	1124.90
		564.10	756	760	644.80	1127.80

## SUPERSEDED PROVISIONS—SOCIAL SECURITY ACT

254 46 FR 27076

337 03/86

I (Primary insurance benefit under 1939 Act, as modified)		II (Primary insurance amount ef- fective for June 1979)	III (Average monthly wage)		IV (Primary insurance amount)	V (Maximum family ben- efits)
If an individual's primary insurance benefit (as deter- mined under subsec. (d)) is—		Or his pri- mary insur- ance amount (as determined under sub- sec. (c)) is—	Or his average monthly wage (as de- termined under sub- sec. (b)) is—		The amount referred to in the pre- ceding para- graphs of this sub- section shall be—	And the maximum amount of benefits payable (as provided in sec. 203(a)) on the basis of his wages and self- employ- ment in- come shall be—
At least—	But not more than—		At least—	But not more than—		
		565.70	761	765	646.60	1131.20
		567.10	766	770	648.20	1134.40
		568.70	771	775	650.10	1137.40
		570.30	776	780	651.90	1140.50
		572.00	781	785	653.80	1143.70
		573.40	786	790	655.40	1146.80
		574.90	791	795	657.20	1150.00
		576.60	796	800	659.10	1153.20
		578.30	801	805	661.00	1156.40
		579.80	806	810	662.80	1159.50
		581.40	811	815	664.60	1162.80
		583.00	816	820	666.40	1165.80
		584.60	821	825	668.20	1169.10
		586.10	826	830	670.00	1172.20
		587.70	831	835	671.80	1175.50
		589.20	836	840	673.50	1178.50
		590.90	841	845	675.40	1181.90
		592.30	846	850	677.00	1184.70
		594.10	851	855	679.10	1188.10
		595.60	856	860	680.80	1191.10
		597.20	861	865	682.60	1194.40
		598.80	866	870	684.50	1197.50
		600.40	871	875	686.30	1200.70
		601.90	876	880	688.00	1203.70
		603.50	881	885	689.90	1207.10
		604.90	886	890	691.50	1210.00
		606.60	891	895	693.40	1213.60
		608.20	896	900	695.20	1216.40
		609.90	901	905	697.20	1219.70
		611.40	906	910	698.90	1222.90
		613.10	911	915	700.80	1226.10
		614.70	916	920	702.70	1229.00
		616.10	921	925	704.30	1232.40
		617.60	926	930	706.00	1235.40
		619.20	931	935	707.80	1238.60
		620.90	936	940	709.70	1241.80
		622.40	941	945	711.50	1245.00
		624.00	946	950	713.30	1248.10
		625.70	951	955	715.20	1251.40
		627.40	956	960	717.20	1254.50
		629.00	961	965	719.00	1257.50
		630.20	966	970	720.40	1260.80
		631.90	971	975	722.30	1264.10
		633.50	976	980	724.10	1267.00
		635.20	981	985	726.10	1270.20
		636.60	986	990	727.70	1273.40
		638.20	991	995	729.50	1276.70



## SUPERSEDED PROVISIONS—SOCIAL SECURITY ACT

337 03/86

46 FR 27076

255

I (Primary insurance benefit under 1939 Act, as modified)		II (Primary insurance amount ef- fective for June 1979)	III (Average monthly wage)		IV (Primary insurance amount)	V (Maximum family ben- efits)
If an individual's primary insurance benefit (as deter- mined under subsec. (d)) is—		Or his pri- mary insur- ance amount (as determined under sub- sec. (c)) is—	Or his average monthly wage (as de- termined under sub- sec. (b)) is—		The amount referred to in the pre- ceding para- graphs of this sub- section shall be—	And the maximum amount of benefits payable (as provided in sec. 203(a)) on the basis of his wages and self- employ- ment in- come shall be—
At least—	But not more than—		At least—	But not more than—		
		639.90	996	1000	731.50	1279.60
		641.30	1001	1005	733.10	1282.30
		642.50	1006	1010	734.40	1285.40
		644.10	1011	1015	736.30	1288.10
		645.60	1016	1020	738.00	1291.20
		646.90	1021	1025	739.50	1293.80
		648.20	1026	1030	740.90	1296.70
		649.80	1031	1035	742.80	1299.60
		651.10	1036	1040	744.30	1302.40
		652.60	1041	1045	746.00	1305.40
		654.20	1046	1050	747.80	1308.10
		655.30	1051	1055	749.10	1310.70
		656.80	1056	1060	750.80	1313.90
		658.40	1061	1065	752.60	1316.60
		659.80	1066	1070	754.20	1319.60
		661.20	1071	1075	755.80	1322.40
		662.50	1076	1080	757.30	1325.20
		664.10	1081	1085	759.10	1328.00
		665.40	1086	1090	760.60	1330.80
		666.90	1091	1095	762.30	1333.80
		668.50	1096	1100	764.10	1336.70
		669.60	1101	1105	765.40	1339.30
		671.10	1106	1110	767.10	1342.30
		672.60	1111	1115	768.80	1345.00
		674.00	1116	1120	770.40	1348.10
		675.50	1121	1125	772.10	1350.80
		676.80	1126	1130	773.60	1353.70
		678.20	1131	1135	775.20	1356.30
		679.70	1136	1140	776.90	1359.50
		681.20	1141	1145	778.70	1362.30
		682.60	1146	1150	780.30	1365.10
		683.80	1151	1155	781.60	1367.80
		685.40	1156	1160	783.50	1370.70
		686.80	1161	1165	785.10	1373.60
		688.20	1166	1170	786.70	1376.60
		689.70	1171	1175	788.40	1379.40
		691.00	1176	1180	789.90	1382.20
		692.30	1181	1185	791.30	1384.70
		693.70	1186	1190	792.90	1387.30
		694.90	1191	1195	794.30	1390.10
		696.30	1196	1200	795.90	1392.70
		697.60	1201	1205	797.40	1395.20
		699.00	1206	1210	799.00	1398.10
		700.20	1211	1215	800.40	1400.60
		701.50	1216	1220	801.90	1403.20
		702.90	1221	1225	803.50	1405.70
		704.30	1226	1230	805.10	1408.50

**SUPERSEDED PROVISIONS—SOCIAL SECURITY ACT**

256 46 FR 27076

337 03/86

I (Primary insurance benefit under 1939 Act, as modified)		II (Primary insurance amount ef- fective for June 1979)	III (Average monthly wage)		IV (Primary insurance amount)	V (Maximum family ben- efits)
If an individual's primary insurance benefit (as deter- mined under subsec. (d)) is—		Or his pri- mary insur- ance amount (as determined under sub- sec. (c)) is—	Or his average monthly wage (as de- termined under sub- sec. (b)) is—		The amount referred to in the pre- ceding para- graphs of this sub- section shall be—	And the maximum amount of benefits payable (as provided in sec. 203(a)) on the basis of his wages and self- employ- ment in- come shall be—
At least—	But not more than—		At least—	But not more than—		
		705.50	1231	1235	806.40	1411.00
		706.80	1236	1240	807.90	1413.80
		708.20	1241	1245	809.50	1416.50
		709.50	1246	1250	811.00	1419.10
		710.80	1251	1255	812.50	1421.60
		712.10	1256	1260	814.00	1424.30
		713.50	1261	1265	815.60	1427.00
		714.70	1266	1270	817.00	1429.60
		716.00	1271	1275	818.40	1432.10
		717.40	1276	1280	820.00	1434.90
		718.50	1281	1285	821.30	1437.30
		719.80	1286	1290	822.80	1439.80
		721.10	1291	1295	824.30	1442.20
		722.30	1296	1300	825.60	1444.70
		723.50	1301	1305	827.00	1447.20
		724.70	1306	1310	828.40	1449.70
		726.00	1311	1315	829.90	1452.10
		727.30	1316	1320	831.40	1454.60
		728.50	1321	1325	832.70	1457.00
		729.80	1326	1330	834.20	1459.70
		730.90	1331	1335	835.50	1462.10
		732.20	1336	1340	837.00	1464.60
		733.50	1341	1345	838.40	1467.00
		734.60	1346	1350	839.70	1469.50
		735.90	1351	1355	841.20	1471.90
		737.10	1356	1360	842.60	1474.40
		738.50	1361	1365	844.20	1476.80
		739.60	1366	1370	845.40	1479.40
		740.90	1371	1375	846.90	1481.80
		742.10	1376	1380	848.30	1484.30
		743.20	1381	1385	849.50	1486.60
		744.40	1386	1390	850.90	1489.00
		745.50	1391	1395	852.20	1491.30
		746.70	1396	1400	853.50	1493.70
		747.90	1401	1405	854.90	1495.90
		749.00	1406	1410	856.20	1498.30
		750.20	1411	1415	857.50	1500.70
		751.40	1416	1420	858.90	1503.10
		752.50	1421	1425	860.20	1505.40
		753.70	1426	1430	861.50	1507.80
		755.00	1431	1435	863.00	1510.00
		756.10	1436	1440	864.30	1512.40
		757.30	1441	1445	865.60	1514.60
		758.50	1446	1450	867.00	1517.20
		759.60	1451	1455	868.30	1519.40
		760.80	1456	1460	869.60	1521.80
		762.00	1461	1465	871.00	1524.10

## SUPERSEDED PROVISIONS—SOCIAL SECURITY ACT

337 03/86

46 FR 27076

257

I (Primary insurance benefit under 1939 Act, as modified)		II (Primary insurance amount ef- fective for June 1979)	III (Average monthly wage)		IV (Primary insurance amount)	V (Maximum family ben- efits)
If an individual's primary insurance benefit (as deter- mined under subsec. (d)) is—		Or his pri- mary insur- ance amount (as determined under sub- sec. (c)) is—	Or his average monthly wage (as de- termined under sub- sec. (b)) is—		The amount referred to in the pre- ceding para- graphs of this sub- section shall be—	And the maximum amount of benefits payable (as provided in sec. 203(a)) on the basis of his wages and self- employ- ment in- come shall be—
At least—	But not more than—		At least—	But not more than—		
		763.10	1466	1470	872.30	1526.40
		764.30	1471	1475	873.60	1528.70
		765.40	1476	1480	874.90	1531.00
		766.50	1481	1485	876.20	1533.30
		767.60	1486	1490	877.40	1535.30
		768.70	1491	1495	878.70	1537.60
		769.80	1496	1500	879.90	1539.80
		770.90	1501	1505	881.20	1542.10
		772.00	1506	1510	882.40	1544.10
		773.10	1511	1515	883.70	1546.40
		774.20	1516	1520	885.00	1548.60
		775.30	1521	1525	886.20	1550.90
		776.40	1526	1530	887.50	1552.90
		777.50	1531	1535	888.70	1555.20
		778.60	1536	1540	890.00	1557.40
		779.70	1541	1545	891.20	1559.70
		780.80	1546	1550	892.50	1561.70
		781.90	1551	1555	893.80	1564.00
		783.00	1556	1560	895.00	1566.20
		784.10	1561	1565	896.30	1568.50
		785.20	1566	1570	897.50	1570.50
		786.30	1571	1575	898.80	1572.80
		787.40	1576	1580	900.00	1575.00
		788.50	1581	1585	901.30	1577.20
		789.60	1586	1590	902.60	1579.30
		790.70	1591	1595	903.80	1581.60
		791.80	1596	1600	905.10	1583.80
		792.90	1601	1605	906.30	1586.00
		794.00	1606	1610	907.60	1588.10
		795.10	1611	1615	908.80	1590.40
		796.20	1616	1620	910.10	1592.60
		797.30	1621	1625	911.40	1594.80
		798.40	1626	1630	912.60	1596.90
		799.50	1631	1635	913.90	1599.20
		800.60	1636	1640	915.10	1601.30
		801.70	1641	1645	916.40	1603.60
		802.80	1646	1650	917.70	1605.70
		803.90	1651	1655	918.90	1608.00
		805.00	1656	1660	920.20	1610.10
		806.10	1661	1665	921.40	1612.40
		807.20	1666	1670	922.70	1614.50
		808.30	1671	1675	923.90	1616.80
		809.40	1676	1680	925.20	1618.90
		810.50	1681	1685	926.50	1621.20
		811.60	1686	1690	927.70	1623.30
		812.70	1691	1695	929.00	1625.60
		813.70	1696	1700	930.10	1627.70



## SUPERSEDED PROVISIONS—SOCIAL SECURITY ACT

258 46 FR 27076

337 03/86

I (Primary insurance benefit under 1939 Act, as modified)		II (Primary insurance amount ef- fective for June 1979)	III (Average monthly wage)		IV (Primary insurance amount)	V (Maximum family ben- efits)
If an individual's primary insurance benefit (as deter- mined under subsec. (d)) is—		Or his pri- mary insur- ance amount (as determined under sub- sec. (c)) is—	Or his average monthly wage (as de- termined under sub- sec. (b)) is—		The amount referred to in the pre- ceding para- graphs of this sub- section shall be—	And the maximum amount of benefits payable (as provided in sec. 203(a)) on the basis of his wages and self- employ- ment in- come shall be—
At least—	But not more than—		At least—	But not more than—		
		814.80	1701	1705	931.40	1630.00
		815.90	1706	1710	932.60	1632.10
		817.00	1711	1715	933.90	1634.30
		818.10	1716	1720	935.10	1636.50
		819.20	1721	1725	936.40	1638.80
		820.30	1726	1730	937.70	1640.90
		821.40	1731	1735	938.90	1643.10
		822.50	1736	1740	940.20	1645.30
		823.60	1741	1745	941.40	1647.60
		824.70	1746	1750	942.70	1649.70
		825.80	1751	1755	943.90	1651.90
		826.90	1756	1760	945.20	1654.10
		828.00	1761	1765	946.50	1656.40
		829.10	1766	1770	947.70	1658.40
		830.20	1771	1775	949.00	1660.70
		831.30	1776	1780	950.20	1662.90
		832.40	1781	1785	951.50	1665.20
		833.50	1786	1790	952.70	1667.20
		834.60	1791	1795	954.00	1669.50
		835.70	1796	1800	955.30	1671.70
		836.80	1801	1805	956.50	1674.00
		837.90	1806	1810	957.80	1676.00
		839.00	1811	1815	959.00	1678.30
		840.10	1816	1820	960.30	1680.50
		841.20	1821	1825	961.50	1682.80
		842.30	1826	1830	962.80	1684.80
		843.40	1831	1835	964.10	1687.10
		844.50	1836	1840	965.30	1689.30
		845.60	1841	1845	966.60	1691.60
		846.70	1846	1850	967.80	1693.60
		847.80	1851	1855	969.10	1695.90
		848.90	1856	1860	970.30	1698.10
		850.00	1861	1865	971.60	1700.30
		851.10	1866	1870	972.90	1702.40
		852.20	1871	1875	974.10	1704.70
		853.30	1876	1880	975.40	1706.90
		854.40	1881	1885	976.60	1709.10
		855.50	1886	1890	977.90	1711.20
		856.60	1891	1895	979.10	1713.50
		857.70	1896	1900	980.40	1715.70
		858.80	1901	1905	981.70	1717.90
		859.90	1906	1910	982.90	1720.00
		860.90	1911	1915	984.10	1722.10
		861.90	1916	1920	985.20	1724.20
		862.90	1921	1925	986.30	1726.10
		863.90	1926	1930	987.50	1728.20
		864.90	1931	1935	988.60	1730.10

## SUPERSEDED PROVISIONS—SOCIAL SECURITY ACT

337 03/86

46 FR 27076

259

I (Primary insurance benefit under 1939 Act, as modified)		II (Primary insurance amount ef- fective for June 1979)	III (Average monthly wage)		IV (Primary insurance amount)	V (Maximum family ben- efits)
If an individual's primary insurance benefit (as deter- mined under subsec. (d)) is—		Or his pri- mary insur- ance amount (as determined under sub- sec. (c)) is—	Or his average monthly wage (as de- termined under sub- sec. (b)) is—		The amount referred to in the pre- ceding para- graphs of this sub- section shall be—	And the maximum amount of benefits payable (as provided in sec. 203(a)) on the basis of his wages and self- employ- ment in- come shall be—
At least—	But not more than—		At least—	But not more than—		
		865.90	1936	1940	989.80	1732.20
		866.90	1941	1945	990.90	1734.10
		867.90	1946	1950	992.10	1736.20
		868.90	1951	1955	993.20	1738.10
		869.90	1956	1960	994.30	1740.20
		870.90	1961	1965	995.50	1742.10
		871.90	1966	1970	996.60	1744.20
		872.90	1971	1975	997.80	1746.10
		873.90	1976	1980	998.90	1748.20
		874.90	1981	1985	1000.10	1750.10
		875.90	1986	1990	1001.20	1752.20
		876.90	1991	1995	1002.30	1754.10
		877.90	1996	2000	1003.50	1756.20
		878.90	2001	2005	1004.60	1758.10
		879.90	2006	2010	1005.80	1760.20
		880.90	2011	2015	1006.90	1762.10
		881.90	2016	2020	1008.10	1764.20
		882.90	2021	2025	1009.20	1766.10
		883.90	2026	2030	1010.30	1768.20
		884.90	2031	2035	1011.50	1770.10
		885.90	2036	2040	1012.60	1772.20
		886.90	2041	2045	1013.80	1774.10
		887.90	2046	2050	1014.90	1776.20
		888.90	2051	2055	1016.10	1778.10
		889.90	2056	2060	1017.20	1780.20
		890.90	2061	2065	1018.30	1782.10
		891.90	2066	2070	1019.50	1784.20
		892.90	2071	2075	1020.60	1786.10
		893.90	2076	2080	1021.80	1788.20
		894.90	2081	2085	1022.90	1790.10
		895.90	2086	2090	1024.10	1792.20
		896.90	2091	2095	1025.20	1794.10
		897.90	2096	2100	1026.30	1796.20
		898.90	2101	2105	1027.50	1798.10
		899.90	2106	2110	1028.60	1800.20
		900.90	2111	2115	1029.80	1802.10
		901.90	2116	2120	1030.90	1804.20
		902.90	2121	2125	1032.10	1806.10
		903.90	2126	2130	1033.20	1808.20
		904.90	2131	2135	1034.40	1810.10
		905.90	2136	2140	1035.50	1812.20
		906.90	2141	2145	1036.60	1814.10
		907.90	2146	2150	1037.80	1816.20
		908.90	2151	2155	1038.90	1818.10
		909.90	2156	2160	1040.10	1820.20

## SUPERSEDED PROVISIONS—SOCIAL SECURITY ACT

260 46 FR 27076

337 03/86

This revised table of benefits was published in the Federal Register on May 14, 1980 (45 FR 31781), as required by P.L. 93-66, §203(f), which reads as follows:

"(f) Effective June 1, 1974, the Secretary of Health, Education, and Welfare, shall prescribe and publish in the Federal Register such modifications and extensions in the table contained in section 215(a) of the Social Security Act (which shall be determined in the same manner as the revisions in such table provided for under section 215(i)(2)(D) of such Act) as may be necessary to reflect the amendments made by this section; and such modified and extended table shall be deemed to be the table appearing in such section 215(a)."

This table was effective through May 1981. For the table effective beginning June 1981, see p. 310.

## 14.3% GENERAL BENEFIT INCREASE

TABLE 2.—TABLE FOR DETERMINING PRIMARY INSURANCE AMOUNT AND MAXIMUM FAMILY BENEFITS UNDER SUBPARAGRAPH (C)(i)(II) OF SUBSECTION 215(a)(1) BEGINNING JUNE 1980

I (Years of coverage)	II (Primary insurance amount)	III (Maximum family benefits)
If an individual's years of coverage (as determined under sec. 215(a)(1)(C)(ii) are—	The amount referred to in sec. 215(a)(1)(C)(i)(II) shall be—	And the maximum amount of benefits payable (as provided in sec. 215(i)(2)(D)) on the basis of his or her wages and self-employment income shall be—
11	\$14.60	\$21.90
12	29.00	43.50
13	43.50	65.30
14	57.90	86.90
15	72.30	108.50
16	86.80	130.20
17	101.20	151.80
18	115.70	173.60
19	130.10	195.20
20	144.50	216.80
21	159.00	238.60
22	173.40	260.20
23	188.00	282.00
24	202.40	303.60
25	216.80	325.20
26	231.30	347.00
27	245.70	368.60
28	260.10	390.20
29	274.60	411.90
30	289.00	433.50

NOTE: The amounts shown in the above table for years of coverage less than 20 are not payable for June 1980 through December 1980 because the corresponding values shown in column II are less than the \$139.50 minimum primary insurance amount payable for that period. For months after December 1980, a special minimum primary insurance amount of \$130.10 will be payable.



**Provisions of the Social Security Act As in Effect Prior to  
P. L. 97-35, Approved August 13, 1981 (95 Stat. 3570)  
Omnibus Budget Reconciliation Act of 1981**

SECTION 1. (b) of enabling each state, as far as practicable under the conditions in such State, to furnish medical assistance on behalf of aged individuals who are not recipients of old-age assistance but whose income and resources are insufficient to meet the costs of necessary medical services, and (c) of encouraging each State, as far as practicable under the conditions in such State, to furnish rehabilitation and other services to help individuals referred to in clause (a) or (b) to attain or retain capability for self-care

**SEC. 2. (a)**

(11) If the State plan includes medical assistance for the aged—

(A) provide for inclusion of some institutional and some noninstitutional care and services;

(B) provide that no enrollment fee, premium, or similar charge will be imposed as a condition of any individual's eligibility for medical assistance for the aged under the plan;

(C) provide for inclusion, to the extent required by regulations prescribed by the Secretary, of provisions (conforming to such regulations) with respect to the furnishing of such assistance to individuals who are residents of the State but are absent therefrom;

(D) include reasonable standards, consistent with the objectives of this title, for determining eligibility for and the extent of such assistance; and

(E) provide that no lien may be imposed against the property of any individual prior to his death on account of medical assistance for the aged paid or to be paid on his behalf under the plan (except pursuant to the judgment of a court on account of benefits incorrectly paid on behalf of such individual), and that there shall be no adjustment or recovery (except, after the death of such individual and his surviving spouse, if any, from such individual's estate) of any medical assistance for the aged correctly paid on behalf of such individual under the plan;

(12) if the State plan includes assistance to or in behalf of individuals who are patients in institutions for mental diseases—

(A) provide for having in effect such agreements or other arrangements with State authorities concerned with mental diseases, and, where appropriate, with such institutions, as may be necessary for carrying out the State plan, including arrangements for joint planning and for development of alternate methods of care, arrangements providing assurance of immediate readmittance to institutions where needed for individuals under alternate plans of care, and arrangements providing for access to patients and facilities, for furnishing information, and for making reports;

(B) provide for an individual plan for each such patient to assure that the institutional care provided to him is in his best interests, including, to that end, assurances that there will be initial and periodic review of his medical and other needs, that he will be given appropriate medical treatment within the institution, and that there will be a periodic determination of his need for continued treatment in the institution;

(C) provide for the development of alternate plans of care, making maximum utilization of available resources, for recipients who would otherwise need care in such institutions, including appropriate medical treatment and other assistance; for services referred to in section 3 (a)(4)(A)(i) and (ii) which are appropriate for such recipients and for such patients; and for methods of administration necessary to assure that the responsibilities of the State agency under the State plan with respect to such recipients and such patients will be effectively carried out; and

(D) provide methods of determining the reasonable costs of institutional care for such patients; and

(13) if the State plan includes assistance to or in behalf of patients in public institutions for mental diseases, show that the State is making satisfactory progress toward developing and implementing a comprehensive mental health program, including provision for utilization of community mental health centers, nursing homes, and other alternatives to care in public institutions for mental diseases.

**SEC. 3. (a)**

(1) in the case of any State other than Puerto Rico, the Virgin Islands, and Guam, an amount equal to the sum of the following proportions of the total

amounts expended during each month of such quarter as old-age assistance under the State plan (including expenditures for premiums under part B of title XVIII for individuals who are recipients of money payments under such plan and other insurance premiums for medical or any other type of remedial care or the costs thereof)—

(A) 31/37 of such expenditures, not counting so much of any expenditure with respect to such month as exceeds the product of \$37 multiplied by the total number of recipients of old-age assistance for such month (which total number, for purposes of this subsection, means (i) the number of individuals who received old-age assistance in the form of money payments for such month, plus (ii) the number of other individuals with respect to whom expenditures were made in such month as old-age assistance in the form of medical or any other type of remedial care); plus

(B) the larger of the following:

(i)(I) the Federal percentage (as defined in section 1101 (a)(8)) of the amount by which such expenditures exceed the amount which may be counted under clause (A), not counting so much of such excess with respect to such month as exceeds the product of \$38 multiplied by the total number of recipients of old-age assistance for such month, plus (II) 15 per centum of the total expended during such month as old-age assistance under the State plan in the form of medical or any other type of remedial care, not counting so much of such expenditure with respect to such month as exceeds the product of \$15 multiplied by the total number of recipients of old-age assistance for such month, or

(ii)(I) the Federal medical percentage (as defined in section 6(c)) of the amount by which such expenditures exceed the maximum which may be counted under clause (A), not counting so much of any expenditures with respect to such month as exceeds (a) the product of \$52 multiplied by the total number of such recipients of old-age assistance for such month, or (b) if smaller, the total expended as old-age assistance in the form of medical or any other type of remedial care with respect to such month plus the product of \$37 multiplied by such total number of such recipients, plus (II) the Federal percentage of the amount by which the total expended during such month as old-age assistance under the State plan exceeds the amount which may be counted under clause (A) and the preceding provisions of this clause (B)(ii), not counting so much of such excess with respect to such month as exceeds the product of \$38 multiplied by the total number of such recipients of old-age assistance for such month;

(2) in the case of Puerto Rico, the Virgin Islands, and Guam, an amount equal to—

(A) one-half of the total of the sums expended during such quarter as old-age assistance under the State plan (including expenditures for premiums under part B of title XVIII for individuals who are recipients of money payments under such plan and other insurance premiums for medical or any other type of remedial care or the cost thereof), not counting so much of any expenditure with respect to any month as exceeds \$37.50 multiplied by the total number of recipients of old-age assistance for such month; plus

(B) the larger of the following amounts: (i) one-half of the amount by which such expenditures exceed the maximum which may be counted under clause (A), not counting so much of any expenditure with respect to any month as exceeds (I) the product of \$45 multiplied by the total number of such recipients of old-age assistance for such month, or (II) if smaller, the total expended as old-age assistance in the form of medical or any other type of remedial care with respect to such month plus the product of \$37.50 multiplied by the total number of such recipients, or (ii) 15 per centum of the total of the sums expended during such quarter as old-age assistance under the State plan in the form of medical or any other type of remedial care, not counting so much of any expenditure with respect to any month as exceeds the product of \$7.50 multiplied by the total number of such recipients of old-age assistance for such month;

(3) in the case of any State, an amount equal to the Federal medical percentage (as defined in section 6(c)) of the total amounts expended during such quarter as medical assistance for the aged under the State plan (including expenditures for insurance premiums for medical or any other type of remedial care or the cost thereof); and

(4) in the case of any State whose State plan approved under section 2 meets the requirements of subsection (c)(1), an amount equal to the sum of the following



proportions of the total amounts expended during such quarter as found necessary by the Secretary of Health, Education, and Welfare for the proper and efficient administration of the State plan—

(A) 75 per centum of so much of such expenditures as are for—

(i) services which are prescribed pursuant to subsection (c)(1) and are provided (in accordance with the next sentence) to applicants for or recipients of assistance under the plan to help them attain or retain capability for self-care, or

(ii) other services, specified by the Secretary as likely to prevent or reduce dependency, so provided to such applicants or recipients, or

(iii) any of the services prescribed pursuant to subsection (c)(1), and of the services specified as provided in clause (ii), which the Secretary may specify as appropriate for individuals who, within such period or periods as the Secretary may prescribe, have been or are likely to become applicants for or recipients of assistance under the plan, if such services are requested by such individuals and are provided to such individuals in accordance with the next sentence, or

(iv) the training including<sup>1</sup> both short- and long-term training at educational institutions through grants to such institutions or by direct financial assistance to students enrolled in such institutions) of personnel employed or preparing for employment by the State agency or by the local agency administering the plan in the political subdivision; plus

(B) one-half of so much of such expenditures (not included under subparagraph (A)) as are for services provided (in accordance with the next sentence) to applicants for or recipients of assistance under the plan, and to individuals requesting such services who (within such period or periods as the Secretary may prescribe) have been or are likely to become applicants for or recipients of such assistance; plus

(C) one-half of the remainder of such expenditures.

The services referred to in subparagraphs (A) and (B) shall, except to the extent specified by the Secretary, include only—

(D) services provided by the staff of the State agency, or of the local agency administering the State plan in the political subdivision: *Provided*, That no funds authorized under this title shall be available for services defined as vocational rehabilitation services under the Vocational Rehabilitation Act (i) which are available to individuals in need of them under programs for their rehabilitation carried on under a State plan approved under such Act, or (ii) which the State agency or agencies administering or supervising the administration of the State plan approved under such Act are able and willing to provide if reimbursed for the cost thereof pursuant to agreement under subparagraph (E), if provided by such staff, and

(E) under conditions which shall be prescribed by the Secretary, services which in the judgment of the State agency cannot be as economically or as effectively provided by the staff of such State or local agency and are not otherwise reasonably available to individuals in need of them, and which are provided, pursuant to agreement with the State agency, by the State health authority or the State agency or agencies administering or supervising the administration of the State plan for vocational rehabilitation services approved under the Vocational Rehabilitation Act or by any other State agency which the Secretary may determine to be appropriate (whether provided by its staff or by contract with public (local) or nonprofit private agencies);

except that services described in clause (ii) of subparagraph (D) hereof may be provided only pursuant to agreement with such State agency or agencies administering or supervising the administration of the State plan for vocational rehabilitation services so approved. The portion of the amount expended for administration of the State plan to which subparagraph (A) applies and the portion thereof to which subparagraphs (B) and (C) apply shall be determined in accordance with such methods and procedures as may be permitted by the Secretary; and

(5) in the case of any State whose State plan approved under section 2 does not meet the requirements of subsection (c)(1), an amount equal to one-half of the total of the sums expended during such quarter as found necessary by the Secretary for the proper and efficient administration of the State plan, including services referred to in paragraph (4) and provided in accordance with the provisions of such paragraph.

<sup>1</sup>As in original. Should be "including".



(c)(1) In order for a State to qualify for payments under paragraph (4) of subsection (a), its State plan approved under section 2 must provide that the State agency shall make available to applicants for or recipients of old-age assistance under such State plan at least those services to help them attain or retain capability for self-care which are prescribed by the Secretary.

(2) In the case of any State whose State plan included a provision meeting the requirements of paragraph (1), but with respect to which the Secretary finds, after reasonable notice and opportunity for hearing to the State agency administering or supervising the administration of such plan, that—

(A) the provision has been so changed that it no longer complies with the requirements of paragraph (1), or

(B) in the administration of the plan there is a failure to comply substantially with such provision, the Secretary shall notify such State agency that further payments will not be made to the State under paragraph (4) of subsection (a) until he is satisfied that there will no longer be any such failure to comply. Until the Secretary is so satisfied further payments with respect to the administration of such State plan shall not be made under paragraph (4) of subsection (a) but shall instead be made, subject to the other provisions of this title, under paragraph (5) of such subsection.

(d) Notwithstanding the preceding provisions of this section, the amount determined under such provisions for any State for any quarter which is attributable to expenditures with respect to patients in institutions for mental diseases shall be paid only to the extent that the State makes a showing satisfactory to the Secretary that total expenditures in the State from Federal, State, and local sources for mental health services (including payments to or in behalf of individuals with mental health problems) under State and local public health and public welfare programs for such quarter exceed the average of the total expenditures in the State from such sources for such services under such programs for each quarter of the fiscal year ending June 30, 1965. For purposes of this subsection, expenditures for such services for each quarter in the fiscal year ending June 30, 1965, in the case of any State shall be determined on the basis of the latest data, satisfactory to the Secretary, available to him at the time of the first determination by him under this subsection for such State; and expenditures for such services for any quarter beginning after December 31, 1965, in the case of any State shall be determined on the basis of the latest data, satisfactory to the Secretary, available to him at the time of the determination under this subsection for such State for such quarter; and determination so made shall be conclusive for purposes of this subsection.

#### SEC. 6.

(b) For purposes of this title, the term "medical assistance for the aged" means payment of part or all of the cost of the following care and services (if provided in or after the third month before the month in which the recipient makes application for assistance) for individuals sixty-five years of age or older who are not recipients of old-age assistance (except, for any month, for recipients of old-age assistance who are admitted to or discharged from a medical institution during such month) but whose income and resources are insufficient to meet all of such cost—

- (1) inpatient hospital services;
- (2) skilled nursing-home services;
- (3) physicians' services;
- (4) outpatient hospital or clinic services;
- (5) home health care services;
- (6) private duty nursing services;
- (7) physical therapy and related services;
- (8) dental services;
- (9) laboratory and X-ray services;
- (10) prescribed drugs, eyeglasses, dentures, and prosthetic devices;
- (11) diagnostic, screening, and preventive services; and
- (12) any other medical care or remedial care recognized under State law;

except that such term does not include any such payments with respect to care or services for any individual who is an inmate of a public institution (except as a patient in a medical institution).

(c) For purposes of this title, the term "Federal medical percentage" for any State shall be 100 per centum less the State percentage; and the State percentage shall be that percentage which bears the same ratio to 50 per centum as the square of the per capita income of such State bears to the square of the per capita income of the continental United States (including Alaska) and Hawaii; except that (i) the Federal medical percentage shall in no case be less than 50 per centum or more than 80 per centum, and (ii) the Federal medical percentage for Puerto Rico, the Virgin Islands, and Guam shall be 50 per centum. The Federal medical percentage for any State shall

be determined and promulgated in accordance with the provisions of subparagraph (B) of section 1101(a)(8) (other than the proviso at the end thereof); except that the Secretary shall, as soon as possible after enactment of the Social Security Amendments of 1960, determine and promulgate the Federal medical percentage for each State—

(1) for the period beginning October 1, 1960, and ending with the close of June 30, 1961, which promulgation shall be based on the same data with respect to per capita income as the data used by the Secretary in promulgating the Federal percentage (under section 1101(a)(8)) for such State for the fiscal year ending June 30, 1961 (which promulgation of the Federal medical percentage shall be conclusive for such period), and

(2) for the period beginning July 1, 1961, and ending with the close of June 30, 1963, which promulgation shall be based on the same data with respect to per capita income as the data used by the Secretary in promulgating the Federal percentage (under section 1101(a)(8)) for such State for such period (which promulgation of the Federal medical percentage shall be conclusive for such period).

## SEC. 202.

(d)  
(6) (A)(i) is a full-time student or is under a disability (as defined in section 223(d)), and (ii) had not attained the age of 22, or

(7) (C) An "educational institution" is (i) a school or college or university operated or directly supported by the United States, or by any State or local government or political subdivision thereof, or (ii) a school or college or university which has been approved by a State or accredited by a State-recognized or nationally-recognized accrediting agency or body, or (iii) a non-accredited school or college or university whose credits are accepted, on transfer, by not less than three institutions which are so accredited, for credit on the same basis as if transferred from an institution so accredited.

(i) (1) if all or part of the burial expenses of such insured individual which are incurred by or through a funeral home or funeral homes remains unpaid, to such funeral home or funeral homes to the extent of such unpaid expenses, but only if (A) any person who assumed the responsibility for the payment of all or any part of such burial expenses files an application, prior to the expiration of two years after the date of death of such insured individual, requesting that such payment be made to such funeral home or funeral homes, or (B) at least 90 days have elapsed after the date of death of such insured individual and prior to the expiration of such 90 days no person has assumed responsibility for the payment of any of such burial expenses;

(2) if all of the burial expenses of such insured individual which were incurred by or through a funeral home or funeral homes have been paid (including payments made under clause (1)), to any person or persons, equitably entitled thereto, to the extent and in the proportions that he or they shall have paid such burial expenses;

(3) if the body of such insured individual is not available for burial but expenses were incurred with respect to such individual in connection with a memorial service, a memorial marker, a site for the marker, or any other item of a kind for which expenses are customarily incurred in connection with a death and such expenses have been paid, to any person or persons, equitably entitled thereto, to the extent and in the proportions that he or they shall have paid such expenses; or

(4) if any part of the amount payable under this subsection remains after payments have been made pursuant to clauses (1), (2), and (3), to any person or persons, equitably entitled thereto, to the extent and in the proportions that he or they shall have paid other expenses in connection with the burial of such insured individual, in the following order of priority: (A) expenses of opening and closing the grave of such insured individual, (B) expenses of providing the burial plot of such insured individual, and (C) any remaining expenses in connection with the burial of such insured individual.

## Minimum Survivor's Benefit

(m)(1) In any case in which an individual is entitled to a monthly benefit under this section on the basis of a primary insurance amount computed under section 215(a) or



(d), as in effect after December 1978, on the basis of the wages and self-employment income of a deceased individual for any month and no other person is (without the application of subsection (j)(1)) entitled to a monthly benefit under this section for that month on the basis of such wages and self-employment income, the individual's benefit amount for that month, prior to reduction under subsection (k)(3), shall not be less than that provided by subparagraph (C)(i)(I) of section 215(a)(1) and increased under section 215(i) for months after November<sup>2</sup> of the year in which the insured individual died as though such benefit were a primary insurance amount.

(2) In the case of any such individual who is entitled to a monthly benefit under subsection (e) or (f), such individual's benefit amount, after reduction under subsection (q)(1), shall be not less than—

(A) \$84.50, if his first month of entitlement to such benefit is the month in which such individual attained age 62 or a subsequent month, or

(B) \$84.50 reduced under subsection (q)(1) as if retirement age as specified in subsection (q)(6)(B)<sup>3</sup> were age 62 instead of the age specified in subsection (q)(9), if his first month of entitlement to such benefit is before the month in which he attained age 62.

(3) In the case of any individual whose benefit amount was computed (or recomputed) under the provisions of paragraph (2) and such individual was entitled to benefits under subsection (e) or (f) for a month prior to any month after 1972 for which a general benefit increase under this title (as defined in section 215(i)(3)) or a benefit increase under section 215(i) becomes effective, the benefit amount of such individual as computed under paragraph (2) without regard to the reduction specified in subparagraph (B) thereof shall be increased by the percentage increase applicable for such benefit increase, prior to the application of subsection (q)(1) pursuant to paragraph (2)(B) and subsection (q)(4).

#### [SEC. 202. (s)]

#### Child Aged 18 or Over Attending School

##### SEC. 215.

##### (a)(1)

(C)(i) No primary insurance amount computed under subparagraph (A) may be less than—

(I) the dollar amount set forth on the first line of column IV in the table of benefits contained in (or deemed to be contained in) this subsection as in effect in December 1978, rounded (if not a multiple of \$1) to the next higher multiple of \$1, or

(II) an amount equal to \$11.50 multiplied by the individual's years of coverage in excess of 10, or the increased amount determined for purposes of this subdivision under subsection (i), whichever is greater. No increase under subsection (i), except as provided in subsection (i)(2)(A), shall apply to the dollar amount specified in subdivision (I) of this clause.

(g) The amount of any primary insurance amount and the amount of any monthly benefit computed under section 202 or 223 which (after reduction under section 203(a) and deductions under section 203(b)) is not a multiple of \$0.10 shall be raised to the next higher multiple of \$0.10.

##### (i)

##### (2)(A)

(iv)(I) In the case of an individual who is entitled to an old-age insurance benefit that is based on a primary insurance amount determined under subsection (a)(1)(C)(i)(I), such primary insurance amount shall not be increased under this subsection for any year before the year in which occurs the first month with respect to which there is payable to such individual all or some part of such benefit after application of the provisions of section 203 relating to deductions on account of work, or, if earlier, the year in which he attains age 65.

(II) In the case of an individual who is entitled to an insurance benefit under subsection (e) or (f) of section 202 that is based on a primary insurance amount determined under subsection (a)(1)(C)(i)(I), such primary insurance amount shall not be increased under this subsection for any year (except as provided in subdivision (III)) before the year in which occurs the first month with respect to which there is payable to such individual all or some part of such benefit after application of the provisions of section 203 relating to deductions on account of work, or, if earlier, the year in which he attains age 65.

<sup>2</sup>P.L. 98-21, §111(a)(7), struck out "May" and substituted "November", effective with respect to cost-of-living increases determined under §215(i) of the Act for years after 1982.

<sup>3</sup>P.L. 98-21, §134(b), struck out "(q)(6)(A)(ii)" and substituted "(q)(6)(B)", effective with respect to benefits for months after December 1983.



# SUPERSEDED PROVISIONS—SOCIAL SECURITY ACT

337 03/86

P. L. 97-35 §222. 267

(III) Any increase under this subsection which would otherwise be applied to a primary insurance amount except for the provisions of subdivision (II) of this clause, shall apply to such primary insurance amount if, during any month of the year in which the increase occurs, any individual is entitled to a benefit under subsection (d), (g), or (h) of section 202 based on such primary insurance amount, and such primary insurance amount is based upon the wages and self-employment income of a deceased individual.

(IV) No primary insurance amount determined under subsection (a)(1)(C)(i)(I) shall be increased under this subsection for any year during which no individual was entitled to any benefit based thereon under section 202 or 223 for any month of such year.

(V) In any case in which an increase under this subsection which occurs during any year applies to a primary insurance amount determined under subsection (a)(1)(C)(i)(I), and such an increase occurring in a later year does not apply to such primary insurance amount on account of the provisions of this clause, any such increase which occurs in a later year which is applicable to such primary insurance amount shall be based upon such primary insurance amount as previously increased under this subsection.

(v) Notwithstanding clause (iv), no primary insurance amount shall be less than that provided under section 215(a)(1) without regard to subparagraph (C)(i)(I) thereof, as subsequently increased by applicable increases under this section.

## SEC. 222.

### COSTS OF REHABILITATION SERVICES FROM TRUST FUNDS

(d)(1) For the purpose of making vocational rehabilitation services more readily available to disabled individuals who are—

(A) entitled to disability insurance benefits under section 223, or

(B) entitled to child's insurance benefits under section 202(d) after having attained age 18 (and are under a disability), or

(C) entitled to widow's insurance benefits under section 202(e) prior to attaining age 60, or

(D) entitled to widower's insurance benefits under section 202(f) prior to attaining age 60,

to the end that savings will result to the Trust Funds as a result of rehabilitating the maximum number of such individuals into productive activity, there are authorized to be transferred from the Trust Funds such sums as may be necessary to enable the Secretary to pay the costs of vocational rehabilitation services for such individuals (including (i) services during their waiting periods, and (ii) so much of the expenditures for the administration of any State plan as is attributable to carrying out this subsection); except that the total amount so made available pursuant to this subsection may not exceed—

(i) 1 percent in the fiscal year ending June 30, 1972,

(ii) 1.25 percent in the fiscal year ending June 30, 1973,

(iii) 1.5 percent in the fiscal year ending June 30, 1974, and thereafter,

of the total of the benefits under section 202(d) for children who have attained age 18 and are under a disability, the benefits under section 202(e) for widows and surviving divorced wives who have not attained age 60 and are under a disability, the benefits under section 202(f) for widowers who have not attained age 60, and the benefits under section 223, which were certified for payment in the preceding year. The selection of individuals (including the order in which they shall be selected) to receive such services shall be made in accordance with criteria formulated by the Secretary which are based upon the effect the provision of such services would have upon the Trust Funds.

(2) In the case of each State which is willing to do so, such vocational rehabilitation services shall be furnished under a State plan for vocational rehabilitation services which—

(A) has been approved under section 5 of the Vocational Rehabilitation Act,

(B) provides that, to the extent funds provided under this subsection are adequate for the purpose, such services will be furnished, to any individual in the State who meets the criteria prescribed by the Secretary pursuant to paragraph (1), with reasonable promptness and in accordance with the order of selection determined under such criteria, and

(C) provides that such services will be furnished to any individual without regard to (i) his citizenship or place of residence, (ii) his need for financial assistance except as provided in regulations of the Secretary in the case of maintenance during rehabilitation, or (iii) any order of selection which would otherwise be followed under the State plan pursuant to section 5(a)(4) of the Vocational Rehabilitation Act.

(3) In the case of any State which does not have a plan which meets the requirements of paragraph (2), the Secretary may provide such services by agreement or contract with other public or private agencies, organizations, institutions, or individuals.

(4) Payments under this subsection may be made in installments, and in advance or by way of reimbursement, with necessary adjustments on account of overpayments or underpayments.

(5) Money paid from the Trust Funds under this subsection to pay the costs of providing services to individuals who are entitled to benefits under section 223 (including services during their waiting periods), or who are entitled to benefits under section 202(d) on the basis of the wages and self-employment income of such individuals shall be charged to the Federal Disability Insurance Trust Fund, and all other money paid out from the Trust Funds under this subsection shall be charged to the Federal Old-Age and Survivors Insurance Trust Fund. The Secretary shall determine according to such methods and procedures as he may deem appropriate—

(A) the total cost of the services provided under this subsection, and

(B) subject to the provisions of the preceding sentence, the amount of such cost which should be charged to each of such Trust Funds.

(6) For the purposes of this subsection the term "vocational rehabilitation services" shall have the meaning assigned to it in the Vocational Rehabilitation Act, except that such services may be limited in type, scope, or amount in accordance with regulations of the Secretary designed to achieve the purposes of this subsection.

#### SEC. 224. (a)

(2) such individual is entitled for such month, under a workmen's compensation law or plan of the United States or a State, to periodic benefits for a total or partial disability (whether or not permanent), and the Secretary has, in a prior month, received notice of such entitlement for such month,

#### SEC. 233.

(c)

(2) Any such agreement may provide that—

(A) an individual who is entitled to cash benefits under this title shall, notwithstanding the provisions of section 202(t), receive such benefits while he resides in a foreign country which is a party to such agreement; and

(B) the benefit paid by the United States to an individual who legally resides in the United States shall, if less when added to the benefit paid by such foreign country than the benefit amount which would be payable to an entitled individual based on the first figure in (or deemed to be in) column IV of the table in section 215(a) in the case of an individual becoming eligible for such benefit before January 1, 1979, or based on a primary insurance amount determined under section 215(a)(1)(C)(i)(I) in the case of an individual becoming eligible for such benefit on or after that date, be increased so that the total of the two benefits is equal to the benefit amount which would be so payable.

SEC. 402. (a) (5) provide (A) such methods of administration (including after January 1, 1940, methods relating to the establishment and maintenance of personnel standards on a merit basis, except that the Administrator shall exercise no authority with respect to the selection, tenure of office, and compensation of any individual employed in accordance with such methods) as are found by the Administrator to be necessary for the proper and efficient operation of the plan, and (B) for the training and effective use of paid subprofessional staff, with particular emphasis on the full-time or part-time employment of recipients and other persons of low income, as community services aides, in the administration of the plan and for the use of nonpaid or partially paid volunteers in a social service volunteer program in providing services to applicants and recipients and in assisting any advisory committees established by the State agency; and<sup>4</sup> (7) except as may be otherwise provided in clause (8), provide that the State agency shall, in determining need, take into consideration any other income and resources of any child or relative claiming aid to families with dependent children, or of any other individual (living in the same home as such child and relative) whose needs the State determines should be considered in determining the need of the child or relative claiming such aid, as well as any expenses reasonably attributable to the earning of any such income; (8) provide that, in making the determination under clause (7), the State agency—

(A) shall with respect to any month disregard—

<sup>4</sup>This paragraph (5) applied in all jurisdictions immediately prior to October 1975 and to Guam, Puerto Rico, and the Virgin Islands until October 1981.

P.L. 93-647, §3(a)(1), amended this paragraph (5), effective with respect to payments under §403 and §603 of the Act for quarters commencing after September 30, 1975, except with respect to Guam, Puerto Rico, and the Virgin Islands.

P.L. 97-35, §2353(b)(1), effective October 1, 1981, repealed this paragraph (5) as it had applied to Guam, Puerto Rico, and the Virgin Islands.



(i) all of the earned income of each dependent child receiving aid to families with dependent children who is (as determined by the State in accordance with standards prescribed by the Secretary) a full-time student or part-time student who is not a full-time employee attending a school, college, or university, or a course of vocational or technical training designed to fit him for gainful employment, and

(ii) in the case of earned income of a dependent child not included under clause (i), a relative receiving such aid, and any other individual (living in the same home as such relative and child) whose needs are taken into account in making such determination, the first \$30 of the total of such earned income for such month plus one-third of the remainder of such income for such month (except that the provisions of this clause (ii) shall not apply to earned income derived from participation on a project maintained under the programs established by section 432(b)(2) and (3)); and

(B)(i) may, subject to the limitations prescribed by the Secretary, permit all or any portion of the earned or other income to be set aside for future identifiable needs of a dependent child, and (ii) may, before disregarding the amounts referred to in subparagraph (A) and clause (i) of this subparagraph, disregard not more than \$5 per month of any income;

except that, with respect to any month, the State agency shall not disregard any earned income (other than income referred to in subparagraph (B)) of—

(C) any one of the persons specified in clause (ii) of subparagraph (A) if such person—

(i) terminated his employment or reduced his earned income without good cause within such period (of not less than 30 days) preceding such month as may be prescribed by the Secretary; or

(ii) refused without good cause, within such period preceding such month as may be prescribed by the Secretary, to accept employment in which he is able to engage which is offered through the public employment offices of the State, or is otherwise offered by an employer if the offer of such employer is determined by the State or local agency administering the State plan, after notification by him, to be a bona fide offer of employment; or

(D) any of such persons specified in clause (ii) of subparagraph (A) if with respect to such month the income of the persons so specified (within the meaning of clause (7)) was in excess of their need as determined by the State agency pursuant to clause (7) (without regard to clause (8)), unless, for any one of the four months preceding such month, the needs of such persons were met by the furnishing of aid under the plan; or

(E)<sup>5</sup> any of the persons specified in clause (ii) of subparagraph (A) with respect to which there is a failure without good cause to make a timely report (as prescribed by the State plan) to the State agency;

(13) provide a description of the services which the State agency makes available to maintain and strengthen family life for children, including a description of the steps taken to assure, in the provision of such services, maximum utilization of other agencies providing similar or related services;<sup>6</sup> (14) provide for the development and application of a program for such family services, as defined in section 406(d), and child-welfare services, as defined in section 425, for each child and relative who receives aid to families with dependent children, and each appropriate individual (living in the same home as a relative and child receiving such aid whose needs are taken into account in making the determination under clause (7)), as may be necessary in the light of the particular home conditions and other needs of such child, relative, and individual, in order to assist such child, relative, and individual to attain or retain capability for self-support and care and in order to maintain and strengthen family life and to foster child development;<sup>7</sup> (15) provide (A) for the development of a program, for each appropriate relative and dependent child receiving aid under the plan and for each appropriate individual (living in the same home as a relative and child receiving such aid) whose needs are taken into account in making the determination under clause (7), for preventing or reducing the incidence of births out of wedlock and otherwise strengthening family life, and for implementing such program by assuring that in all appropriate cases (including minors who can be considered to be

<sup>5</sup>Alignment as in public law.

<sup>6</sup>This paragraph applied in all jurisdictions until October 1975 and to Guam, Puerto Rico, and the Virgin Islands from October 1975 until October 1981.

P.L. 93-647, §3(a)(2), effective with respect to payments under §403 and §603 of the Act for quarters commencing after September 30, 1975, struck out this paragraph except with respect to Guam, Puerto Rico, and the Virgin Islands.

P.L. 97-35, §2353(b)(1), effective October 1, 1981, repealed this paragraph as in effect with respect to Guam, Puerto Rico, and the Virgin Islands.

<sup>7</sup>See footnote 6.



sexually active) family planning services are offered to them and are provided promptly (directly or under arrangements with others) to all individuals voluntarily requesting such services, but acceptance of family planning services provided under the plan shall be voluntary on the part of such members and individuals and shall not be a prerequisite to eligibility for or the receipt of any other service under the plan; and (B) to the extent that services provided under this clause or clause (14) are furnished by the staff of the State agency or the local agency administering the State plan in each of the political subdivisions of the State, for the establishment of a single organizational unit in such State or local agency, as the case may be, responsible for the furnishing of such services;<sup>8</sup> (19)

(A)

(i) a child who is under age 16 or attending school full time;

(v) a parent<sup>9</sup> or other relative of a child under the age of six who is caring for the child;

(d)(1) For purposes of paragraphs (7) and (8) of subsection (a), any refund of Federal income taxes made by reason of section 43 of the Internal Revenue Code of 1954 (relating to earned income credit) and any payment made by an employer under section 3507 of such Code (relating to advance payment of earned income credit shall be considered earned income.

SEC. 403. (a)

(3)

(A) 75 per centum of so much of such expenditures as are for the training of personnel employed or preparing for employment by the State agency or by the local agency administering the plan in the political subdivision,

(3) in the case of any State, an amount equal to the sum of the following proportions of the total amounts expended during such quarter as found necessary by the Secretary of Health, Education, and Welfare for the proper and efficient administration of the State plan—

(A) 75 per centum of so much of such expenditures as are for—

(i) any of the services described in clauses (14) and (15) of section 402(a) which are provided to any child or relative who is receiving aid under the plan, or to any other individual (living in the same home as such relative and child) whose needs are taken into account in making the determination under clause (7) of such section,

(ii) any of the services described in clauses (14) and (15) of section 402(a) which are provided to any child or relative who is applying for aid to families with dependent children or who, within such period or periods as the Secretary may prescribe, has been or is likely to become an applicant for or recipient of such aid, or

(iii) the training (including<sup>10</sup> both short- and long-term training at educational institutions through grants to such institutions or by direct financial assistance to students enrolled in such institutions) of personnel employed or preparing for employment by the State agency or by the local agency administering the plan in the political subdivision; plus<sup>11</sup>

(B) one-half of the remainder of such expenditures.

The services referred to in subparagraph (A) shall include only—

(C) services provided by the staff of the State agency, or of the local agency administering the State plan in the political subdivision: *Provided*, That no funds authorized under this part shall be available for services defined as vocational rehabilitation services under the Vocational Rehabilitation Act (i) which are available to individuals in need of them under programs for their rehabilitation carried on under a State plan approved under such Act, or (ii) which the State agency or agencies administering or supervising the administration of the State plan approved under such Act are able and willing to provide if reimbursed for the cost thereof pursuant to agreement under subparagraph (D), if provided by such staff, and

(D) under conditions which shall be prescribed by the Secretary, services which in the judgment of the State agency cannot be as economically or as

<sup>8</sup>This paragraph (15) applied in all jurisdictions until October 1975; to Guam, Puerto Rico, and the Virgin Islands from October 1975 until October 1981; and to all jurisdictions after September 30, 1981.

P.L. 93-647, §3(a)(8), effective with respect to payments under §403 and §603 of the Act for quarters commencing after September 30, 1975, amended paragraph (15) except with respect to Guam, Puerto Rico, and the Virgin Islands.

P.L. 97-35, §2353(b)(1), effective October 1, 1981, repealed this paragraph (15) as it applied to Guam, Puerto Rico, and the Virgin Islands.

P.L. 97-35, §2353(b)(2), effective October 1, 1981, made one paragraph (15) applicable in all jurisdictions.

<sup>9</sup>P.L. 97-35, §2313(b)(1), struck out "mother" and substituted "parent", effective October 1, 1981.

<sup>10</sup>As in original. Should be "including".

<sup>11</sup>P.L. 97-35, §2319(b), repealed this clause (iii), applicable to expenditures made after September 30, 1981.

effectively provided by the staff of such State or local agency and are not otherwise reasonably available to individuals in need of them, and which are provided, pursuant to agreement with the State agency, by the State health authority or the State agency or agencies administering or supervising the administration of the State plan for vocational rehabilitation services approved under the Vocational Rehabilitation Act or by any other State agency which the Secretary may determine to be appropriate (whether provided by its staff or by contract with public (local) or nonprofit private agencies);

except that services described in clause (ii) of subparagraph (C) hereof may be provided only pursuant to agreement with such State agency or agencies administering or supervising the administration of the State plan for vocational rehabilitation services so approved; and except that, to the extent specified by the Secretary, child-welfare services, family planning services, and family services may be provided from sources other than those referred to in subparagraphs (C) and (D). The portion of the amount expended for administration of the State plan to which subparagraph (A) applies and the portion thereof to which subparagraph (B) applies shall be determined in accordance with such methods and procedures as may be permitted by the Secretary.<sup>12</sup>

(e) Notwithstanding any other provision of subsection (a), with respect to expenditures during any calendar quarter beginning after December 31, 1972 (as found necessary by the Secretary for the proper and efficient administration of the plan) which are attributable to the offering, arranging, and furnishing, directly or on a contract basis, of family planning services and supplies, the amount payable to any State under this part shall be 90 per centum of such expenditures.<sup>13</sup>

(g) Notwithstanding any other provision of this section, the amount payable to any State under this part for quarters in a fiscal year shall with respect to quarters in fiscal years beginning after June 30, 1974, be reduced by 1 per centum (calculated without regard to any reduction under section 403(f) of such amount if such State fails to—

(1) inform all families in the State receiving aid to families with dependent children under the plan of the State approved under this part of the availability of child health screening services under the plan of such State approved under title XIX,

(2) provide or arrange for the provision of such screening services in all cases where they are requested, or

(3) arrange for (directly or through referral to appropriate agencies, organizations, or individuals) corrective treatment the need for which is disclosed by such child health screening services.

#### SEC. 406.

(a) (2) who is (A) under the age of eighteen, or (B) at the option of the State, under the age of twenty-one and (as determined by the State in accordance with standards prescribed by the Secretary) a student regularly attending a school, college, or university, or regularly attending a course of vocational or technical training designed to fit him for gainful employment, or (C) at the option of the State, under the age of twenty-one and (as determined by the State in accordance with standards prescribed by the Secretary) a student regularly attending a school in grade twelve or below or regularly attending a course of vocational or technical training, other than a course provided by or through a college or university, designed to fit him for gainful employment;

(d) The term "family services" means services to a family or any member thereof for the purpose of preserving, rehabilitating, reuniting, or strengthening the family, and such other services as will assist members of a family to attain or retain capability for the maximum self-support and personal independence.<sup>14</sup>

<sup>12</sup>P.L. 93-647, §3(a)(3), amended paragraph (3) in its entirety, effective with respect to payments under §403 and §603 of the Act for quarters commencing after September 30, 1975, except that in the case of Guam, Puerto Rico, and the Virgin Islands, this paragraph (3) continued to apply.

P.L. 97-35, §2353(b)(1), effective October 1, 1981, repealed this paragraph (3) as it applied to Guam, Puerto Rico, and the Virgin Islands, and §2353(b)(2) made one paragraph (3) applicable in all jurisdictions.

<sup>13</sup>This subsection (e) applied in all jurisdictions immediately prior to October 1975 and to Guam, Puerto Rico, and the Virgin Islands until October 1981.

P.L. 93-647, §3(a)(4), effective with respect to payments under §403 and §603 of the Act for quarters commencing after September 30, 1975, deleted subsection (e) except with respect to Guam, Puerto Rico, and the Virgin Islands.

P.L. 97-35, §2353(b)(1), effective October 1, 1981, repealed this subsection (e) as it applied to Guam, Puerto Rico, and the Virgin Islands.

<sup>14</sup>This subsection (d) applied in all jurisdictions immediately prior to October 1975 and to Guam, Puerto Rico, and the Virgin Islands until October 1981.

P.L. 93-647, §3(a)(5), effective with respect to payments under §403 and §603 of the Act for quarters commencing after September 30, 1975, deleted subsection (d) except with respect to Guam, Puerto Rico, and the Virgin Islands.

P.L. 97-35, §2353(b)(1), effective October 1, 1981, repealed this subsection (d) as it applied to Guam, Puerto Rico, and the Virgin Islands.



## [SEC. 407.]

## DEPENDENT CHILDREN OF UNEMPLOYED FATHERS

## COMMUNITY WORK AND TRAINING PROGRAMS

SEC. 409. (a) For the purpose of assisting the States in encouraging, through community work and training programs of a constructive nature, the conservation of work skills and the development of new skills for individuals who have attained the age of 18 and are receiving aid to families with dependent children, under conditions which are designed to assure protection of the health and welfare of such individuals and the dependent children involved, expenditures (other than for medical or any other type of remedial care) for any month with respect to a dependent child (including payments to meet the needs of any relative or relatives, specified in section 406(a), with whom he is living) under a State plan approved under section 402 shall not be excluded from aid to families with dependent children because such expenditures are made in the form of payments for work performed in such month by any one or more of the relatives with whom such child is living if such work is performed for the State agency or any other public agency under a program (which need not be in effect in all political subdivisions of the State) administered by or under the supervision of such State agency, if there is State financial participation in such expenditures, and if such State plan includes—

(1) provisions which, in the judgment of the Secretary, provide reasonable assurance that—

(A) appropriate standards for health, safety, and other conditions applicable to the performance of such work by such relatives are established and maintained;

(B) payments for such work are at rates not less than the minimum rate (if any) provided by or under State law for the same type of work and not less than the rates prevailing on similar work in the community;

(C) such work is performed on projects which serve a useful public purpose, do not result either in displacement of regular workers or in the performance by such relatives of work that would otherwise be performed by employees of public or private agencies, institutions, or organizations, and (except in cases of projects which involve emergencies or which are generally of a nonrecurring nature) are of a type which has not normally been undertaken in the past by the State or community, as the case may be;

(D) in determining the needs of any such relative, any additional expenses reasonably attributable to such work will be considered;

(E) any such relative shall have reasonable opportunities to seek regular employment and to secure any appropriate training or retraining which may be available;

(F) any such relative will, with respect to the work so performed, be covered under the State workmen's compensation law or be provided comparable protection; and

(G) aid under the plan will not be denied with respect to any such relative (or the dependent child) for refusal by such relative to perform any such work if he has good cause for such refusal;

(2) provision for entering into cooperative arrangements with the system of public employment offices in the State looking toward employment or occupational training of any such relatives performing work under such program, including appropriate provision for registration and periodic reregistration of such relatives and for maximum utilization of the job placement services and other services and facilities of such offices;

(3) provision for entering into cooperative arrangements with the State agency or agencies responsible for administering or supervising the administration of vocational education and adult education in the State, looking toward maximum utilization of available public vocational or adult education services and facilities in the State in order to encourage the training or retraining of any such relatives performing work under such program and otherwise assist them in preparing for regular employment;

(4) provision for assuring appropriate arrangements for the care and protection of the child during the absence from the home of any such relative performing work under such program in order to assure that such absence and work will not be inimical to the welfare of the child;

(5) provision that there will be no adjustment or recovery by the State or any political subdivision thereof on account of any payments which are correctly made for such work; and

(6) such other provisions as the Secretary finds necessary to assure that the operation of such program will not interfere with achievement of the objectives set forth in section 401.



(b) In the case of any State which makes expenditures in the form described in subsection (a) under its State plan approved under section 402, the proper and efficient administration of the State plan, for purposes of section 403(a)(3) and (4), may not include the cost of making or acquiring materials or equipment in connection with the work performed under a program referred to in subsection (a) or the cost of supervision of work under such program, and may include only such other costs attributable to such programs as are permitted by the Secretary.

## SEC. 454.

(6) (C) any costs in excess of the fee so imposed may be collected from such individual by deducting such costs from the amount of any recovery made;

## TITLE V—MATERNAL AND CHILD HEALTH AND CRIPPLED CHILDREN'S SERVICES

### AUTHORIZATION OF APPROPRIATIONS

SEC. 501. For the purpose of enabling each State to extend and improve (especially in rural areas and in areas suffering from severe economic distress), as far as practicable under the conditions in such State,

(1) services for reducing infant mortality and otherwise promoting the health of mothers and children; and

(2) services for locating, and for medical, surgical, corrective, and other services and care for and facilities for diagnosis, hospitalization, and aftercare for, children who are crippled or who are suffering from conditions leading to crippling, there are authorized to be appropriated \$250,000,000 for the fiscal year ending June 30, 1969, \$275,000,000 for the fiscal year ending June 30, 1970, \$300,000,000 for the fiscal year ending June 30, 1971, \$325,000,000 for the fiscal year ending June 30, 1972, \$350,000,000 for the fiscal year ending June 30, 1973, and for each of the next four fiscal years, and \$399,864,200 for the fiscal year ending September 30, 1978, and and<sup>15</sup> for each of the next three fiscal years, and, subject to section 2194(b)(3) of the Maternal and Child Health Services Block Grant Act, \$317,580,000 for the fiscal year ending September 30, 1982<sup>16</sup>.

### PURPOSES FOR WHICH FUNDS ARE AVAILABLE

SEC. 502. Appropriations pursuant to section 501 shall be available for the following purposes in the following proportions:

(1) In the case of the fiscal year ending June 30, 1969, and each of the next 5 fiscal years, (A) 50 percent of the appropriation for such year shall be for allotments pursuant to sections 503 and 504; (B) 40 percent thereof shall be for grants pursuant to sections 508, 509, and 510; and (C) 10 percent thereof shall be for grants, contracts, or other arrangements pursuant to sections 511 and 512.

(2) In the case of the fiscal year ending June 30, 1975, and each fiscal year thereafter, (A) 90 percent of the appropriation for such years shall be for allotments pursuant to sections 503 and 504; and (B) 10 percent thereof shall be for grants, contracts, or other arrangements pursuant to sections 511 and 512.

Not to exceed 5 percent of the appropriation for any fiscal year under this section shall be transferred, at the request of the Secretary, from one of the purposes specified in paragraph (1) or (2) to another purpose or purposes so specified. For each fiscal year, the Secretary shall determine the portion of the appropriation, within the percentage determined above to be available for sections 503 and 504, which shall be available for allotment pursuant to section 503 and the portion thereof which shall be available for allotment pursuant to section 504. Notwithstanding the preceding provisions of this section, of the amount appropriated for any fiscal year pursuant to section 501, not less than 6 percent of the amount appropriated shall be available for family planning services from allotments under section 503 and for family planning services under projects under sections 508 and 512.

### ALLOTMENTS TO STATES FOR MATERNAL AND CHILD HEALTH SERVICES

SEC. 503. The amount determined to be available pursuant to section 502 for allotments under this section shall be allotted for payments for maternal and child health services as follows:

<sup>15</sup>As in original. One "and" should be stricken.

<sup>16</sup>P.L. 97-35, §2193(a)(3), struck out "for each fiscal year thereafter" and substituted "and for each of the next three fiscal years, and, subject to section 2194(b)(3) of the Maternal and Child Health Services Block Grant Act, \$317,580,000 for the fiscal year ending September 30, 1982".

(1) One-half of such amount shall be allotted by allotting to each State \$70,000 plus such part of the remainder of such one-half as he finds that the number of live births in such State bore to the total number of live births in the United States in the latest calendar year for which he has statistics.

(2) The remaining one-half of such amount shall (in addition to the allotments under paragraph (1)) be allotted to the States from time to time according to the financial need of each State for assistance in carrying out its State plan, as determined by the Secretary after taking into consideration the number of live births in such State; except that not more than 25 percent of such one-half shall be available for grants to State agencies (administering or supervising the administration of a State plan approved under section 505), and to public or other nonprofit institutions of higher learning (situated in any State), for special projects of regional or national significance which may contribute to the advancement of maternal and child health.

#### ALLOTMENTS TO STATES FOR CRIPPLED CHILDREN'S SERVICES

SEC. 504. The amount determined to be available pursuant to section 502 for allotments under this section shall be allotted for payments for crippled children's services as follows:

(1) One-half of such amount shall be allotted by allotting to each State \$70,000 and allotting the remainder of such one-half according to the need of each State as determined by him after taking into consideration the number of crippled children in such State in need of the services referred to in paragraph (2) of section 501 and the cost of furnishing such services to them.

(2) The remaining one-half of such amount shall (in addition to the allotments under paragraph (1)) be allotted to the States from time to time according to the financial need of each State for assistance in carrying out its State plan, as determined by the Secretary after taking into consideration the number of crippled children in each State in need of the services referred to in paragraph (2) of section 501 and the cost of furnishing such services to them; except that not more than 25 percent of such one-half shall be available for grants to State agencies (administering or supervising the administration of a State plan approved under section 505), and to public or other nonprofit institutions of higher learning (situated in any State), for special projects of regional or national significance which may contribute to the advancement of services for crippled children.

#### APPROVAL OF STATE PLANS

SEC. 505. (a) In order to be entitled to payments from allotments under section 502, a State must have a State plan for maternal and child health services and services for crippled children which—

(1) provides for financial participation by the State;

(2) provides for the administration of the plan by the State health agency or the supervision of the administration of the plan by the State health agency; except that in the case of those States which on July 1, 1967, provided for administration (or supervision thereof) of the State plan approved under section 513 (as in effect on such date) by a State agency other than the State health agency, the plan of such State may be approved under this section if it would meet the requirements of this subsection except for provision of administration (or supervision thereof) by such other agency for the portion of the plan relating to services for crippled children, and, in each such case, the portion of such plan which each such agency administers, or the administration of which each such agency supervises, shall be regarded as a separate plan for purposes of this title;

(3) provides (A) such methods of administration (including methods relating to the establishment and maintenance of personnel standards on a merit basis, except that the Secretary shall exercise no authority with respect to the selection, tenure of office, and compensation of any individual employed in accordance with such methods) as are necessary for the proper and efficient operation of the plan and (B) provides for the training and effective use of paid subprofessional staff, with particular emphasis on the full-time or part-time employment of persons of low income, as community service aides, in the administration of the plan and for the use of nonpaid or partially paid volunteers in providing services and in assisting any advisory committees established by the State agency;

(4) provides that the State agency will make such reports, in such form and containing such information, as the Secretary may from time to time require, and comply with such provisions as he may from time to time find necessary to assure the correctness and verification of such reports;



(5) provides for cooperation with medical, health, nursing, educational, and welfare groups and organizations and, with respect to the portion of the plan relating to services for crippled children, with any agency in such State charged with administering State laws providing for vocational rehabilitation of physically handicapped children;

(6) provides for payment of the reasonable cost of inpatient hospital services provided under the plan, as determined in accordance with methods and standards, consistent with section 1122, which shall be developed by the State and included in the plan, except that the reasonable cost of any such services as determined under such methods and standards shall not exceed the amount which would be determined under section 1861(v) as the reasonable cost of such services for purposes of title XVIII;

(7) provides, with respect to the portion of the plan relating to services for crippled children, for early identification of children in need of health care and services, and for health care and treatment needed to correct or ameliorate defects or chronic conditions discovered thereby, through provision of such periodic screening and diagnostic services, and such treatment, care and other measures to correct or ameliorate defects or chronic conditions, as may be provided in regulations of the Secretary;

(8) effective July 1, 1974, provides a program (carried out directly or through grants or contracts) of projects described in section 508 which offers reasonable assurance, particularly in areas with concentrations of low-income families, of satisfactorily helping to reduce the incidence of mental retardation and other handicapping conditions caused by complications associated with child bearing and of satisfactorily helping to reduce infant and maternal mortality;

(9) effective July 1, 1974, provides a program (carried out directly or through grants or contracts) of projects described in section 509 which offers reasonable assurance, particularly in areas with concentrations of low-income families, of satisfactorily promoting the health of children and youth of school or preschool age;

(10) effective July 1, 1974, provides a program (carried out directly or through grants or contracts) of projects described in section 510 which offers reasonable assurance, particularly in areas with concentrations of low-income families, of satisfactorily promoting the dental health of children and youth of school or preschool age;

(11) provides for carrying out the purposes specified in section 501;

(12) provides for the development of demonstration services (with special attention to dental care for children and family planning services for mothers) in needy areas and among groups in special need;<sup>17</sup>

(13) provides that, where payment is authorized under the plan for services which an optometrist is licensed to perform, the individual for whom such payment is authorized may, to the extent practicable, obtain such services from an optometrist licensed to perform such services except where such services are rendered in a clinic, or another appropriate institution, which does not have an arrangement with optometrists so licensed;

(14) provides that acceptance of family planning services provided under the plan shall be voluntary on the part of the individual to whom such services are offered and shall not be a prerequisite to eligibility for or the receipt of any service under the plan;

(15) provides—

(A) that the State health agency, or other appropriate State medical agency, shall be responsible for establishing a plan, consistent with regulations prescribed by the Secretary, for the review by appropriate professional health personnel of the appropriateness and quality of care and services furnished to recipients of services under the plan and, where applicable, for providing guidance with respect thereto to the other State agency referred to in paragraph (2); and

(B) that the State or local agency utilized by the Secretary for the purpose specified in the first sentence of section 1864(a), or, if such agency is not the State agency which is responsible for licensing health institutions, the State agency responsible for such licensing, will perform the function of determining whether institutions and agencies meet the requirements for participation in the program under the plan under this title; and

(16) provides (A) that the records of any entity participating in the plan and providing services reimbursable on a cost-related basis will be audited as the Secretary determines to be necessary to insure that proper payments are made

<sup>17</sup>As in original. Comma should be a semicolon.



under the plan, (B) that such audits, for entities also providing services under title XVIII, will be coordinated and conducted jointly (to such extent and in such manner as the Secretary shall prescribe) with audits conducted for purposes of such part, and (C) for payment of such proportion of costs of each such common audit as is determined under methods specified by the Secretary under section 1129(a).

(b) The Secretary shall approve any plan which meets the requirements of subsection (a).

#### PAYMENTS

SEC. 506. (a) From the sums appropriated therefor and the allotments available under section 503(1) or 504(1), as the case may be, the Secretary shall pay to each State which has a plan approved under this title, for each quarter, beginning with the quarter commencing July 1, 1968, an amount, which shall be used exclusively for carrying out the State plan, equal to one-half of the total sum expended during such quarter for carrying out such plan with respect to maternal and child health services and services for crippled children, respectively.

(b)(1) Prior to the beginning of each quarter, the Secretary shall estimate the amount to which a State will be entitled under subsection (a) for such quarter, such estimates to be based on (A) a report filed by the State containing its estimate of the total sum to be expended in such quarter in accordance with the provisions of such subsection, and stating the amount appropriated or made available by the State and its political subdivisions for such expenditures in such quarter, and if such amount is less than the State's proportionate share of the total sum of such estimated expenditures, the source or sources from which the difference is expected to be derived, and (B) such other investigation as the Secretary may find necessary.

(2) The Secretary shall then pay to the State, in such installments as he may determine, the amount so estimated, reduced or increased to the extent of any overpayment or underpayment which the Secretary determines was made under this section to such State for any prior quarter and with respect to which adjustment has not already been made under this subsection.

(3) Upon the making of an estimate by the Secretary under this subsection, any appropriations available for payments under this section shall be deemed obligated.

(c) The Secretary shall also from time to time make payments to the States from their respective allotments pursuant to section 503(2) or 504(2). Payments of grants under sections 503(2), 504(2), 508, 509, 510, and 511, and of grants, contracts, or other arrangements under section 512, may be made in advance or by way of reimbursement, and in such installments, as the Secretary may determine; and shall be made on such conditions as the Secretary finds necessary to carry out the purposes of the section involved.

(d) The total amount determined under subsections (a) and (b) and the first sentence of subsection (c) for any fiscal year ending after June 30, 1968, shall be reduced by the amount by which the sum expended (as determined by the Secretary) from non-Federal sources for maternal and child health services and services for crippled children for such year is less than the sum expended from such sources for such services for the fiscal year ending June 30, 1968. In the case of any such reduction, the Secretary shall determine the portion thereof which shall be applied, and the manner of applying such reduction, to the amounts otherwise payable from allotments under section 503 or section 504.

(e) Notwithstanding the preceding provisions of this section, no payment shall be made to any State thereunder from the allotments under section 503 or section 504 for any period after June 30, 1968, unless the State makes a satisfactory showing that it is extending the provision of services, including services for dental care for children and family planning for mothers, to which such State's plan applies in the State with a view to making such services available by July 1, 1975, to children and mothers in all parts of the State.

(f) Notwithstanding the preceding provisions of this section, no payment shall be made to any State thereunder—

(1) with respect to any amount paid for items or services furnished under the plan after December 31, 1972, to the extent that such amount exceeds the charge which would be determined to be reasonable for such items or services under the fourth and fifth sentences of section 1842(b)(3); or

(2) with respect to any amount paid for services furnished under the plan after December 31, 1972, by a provider or other person during any period of time, if payment may not be made under title XVIII with respect to services furnished by such provider or person during such period of time solely by reason of a determination by the Secretary under section 1862(d)(1) or under clause (D), (E), or (F) of section 1866(b)(2); or

(3) with respect to any amount expended for inpatient hospital services furnished under the plan to the extent that such amount exceeds the hospital's customary charges with respect to such services or (if such services are furnished under the plan by a public institution free of charge or at nominal charges to the public) exceeds an amount determined on the basis of those items (specified in regulations prescribed by the Secretary) included in the determination of such payment which the Secretary finds will provide fair compensation to such institution for such services; or

(4) with respect to any amount expended for services furnished under the plan by a hospital unless such hospital has in effect a utilization review plan which meets the requirement imposed by section 1861(k) for purposes of title XVIII; and if such hospital has in effect such a utilization review plan for purposes of title XVIII, such plan shall serve as the plan required by this subsection (with the same standards and procedures and the same review committee or group) as a condition of payment under this title; the Secretary is authorized to waive the requirements of this paragraph in any State if the State agency demonstrates to his satisfaction that it has in operation utilization review procedures which are superior in their effectiveness to the procedures required under section 1861(k).

(g) For limitation on Federal participation for capital expenditures which are out of conformity with a comprehensive plan of a State or areawide planning agency, see section 1122.

#### OPERATION OF STATE PLANS

SEC. 507. If the Secretary, after reasonable notice and opportunity for hearing to the State agency administering or supervising the administration of the State plan approved under this title, finds—

(1) that the plan has been so changed that it no longer complies with the provisions of section 505; or

(2) that in the administration of the plan there is a failure to comply substantially with any such provision;

the Secretary shall notify such State agency that further payments will not be made to the State (or, in his discretion, that payments will be limited to categories under or parts of the State plan not affected by such failure), until the Secretary is satisfied that there will no longer be any such failure to comply. Until he is so satisfied he shall make no further payments to such State (or shall limit payments to categories under or parts of the State plan not affected by such failure).

#### SPECIAL PROJECT GRANTS FOR MATERNITY AND INFANT CARE

SEC. 508. (a) In order to help reduce the incidence of mental retardation and other handicapping conditions caused by complications associated with childbearing and to help reduce infant and maternal mortality, the Secretary is authorized to make, from the sums available under clause (B) of paragraph (1) of section 502, grants to the State health agency of any State and, with the consent of such agency, to the health agency of any political subdivision of the State, and to any other public or nonprofit private agency, institution, or organization, to pay not to exceed 75 percent of the cost (exclusive of general agency overhead) of any project for the provision of—

(1) necessary health care to prospective mothers (including, after childbirth, health care to mothers and their infants) who have or are likely to have conditions associated with childbearing or are in circumstances which increase the hazards to the health of the mothers or their infants (including those which may cause physical or mental defects in the infants), or

(2) necessary health care to infants during their first year of life who have any condition or are in circumstances which increase the hazards to their health, or

(3) family planning services,

but only if the State or local agency determines that the recipient will not otherwise receive such necessary health care or services because he is from a low-income family or for other reasons beyond his control. Acceptance of family planning services provided under a project under this section (and section 512) shall be voluntary on the part of the individual to whom such services are offered and shall not be a prerequisite to the eligibility for or the receipt of any service under such project.

(b) No grant may be made under this section for any project for any period after June 30, 1974.



SPECIAL PROJECT GRANTS FOR HEALTH OF SCHOOL AND PRESCHOOL  
CHILDREN

SEC. 509. (a) In order to promote the health of children and youth of school or preschool age, particularly in areas with concentrations of low-income families, the Secretary is authorized to make, from the sums available under clause (B) of paragraph (1) of section 502, grants to the State health agency of any State and (with the consent of such agency) to the health agency of any political subdivision of the State, to the State agency of the State administering or supervising the administration of the State plan approved under section 505, to any school of medicine (with appropriate participation by a school of dentistry), and to any teaching hospital affiliated with such a school, to pay not to exceed 75 percent of the cost of projects of a comprehensive nature for health care and services for children and youth of school age or for preschool children (to help them prepare to start school). No project shall be eligible for a grant under this section unless it provides (1) for the coordination of health care and services provided under it with, and utilization (to the extent feasible) of, other State or local health, welfare, and education programs for such children, (2) for payment of (A) the reasonable cost (as determined in accordance with standards, consistent with section 1122, approved by the Secretary) of inpatient hospital services provided under the project, or (B) if less, the customary charges with respect to such services provided under the project, or (C) if such services are furnished under the project by a public institution free of charge or at nominal charges to the public, an amount determined on the basis of those items (specified in regulations prescribed by the Secretary) included in the determination of such reasonable cost which the Secretary finds will provide fair compensation to such institution for such services and (3) that any treatment, correction of defects, or aftercare provided under the project is available only to children who would not otherwise receive it because they are from low-income families or for other reasons beyond their control; and no such project for children and youth of school age shall be considered to be of a comprehensive nature for purposes of this section unless it includes (subject to the limitation in the preceding provisions of this sentence) at least such screening, diagnosis, preventive services, treatment, correction of defects, and aftercare, both medical and dental, as may be provided for in regulations of the Secretary.

(b) No grant may be made under this section for any project for any period after June 30, 1974.

## SPECIAL PROJECT GRANTS FOR DENTAL HEALTH OF CHILDREN

SEC. 510. (a) In order to promote the dental health of children and youth of school or preschool age, particularly in areas with concentrations of low-income families, the Secretary is authorized to make grants, from the sums available under clause (B) of paragraph (1) of section 502, to the State health agency of any State and (with the consent of such agency) to the health agency of any political subdivision of the State, and to any other public or nonprofit private agency, institution, or organization, to pay not to exceed 75 percent of the cost of projects of a comprehensive nature for dental care and services for children and youth of school age or for preschool children. No project shall be eligible for a grant under this section unless it provides that any treatment, correction of defects, or aftercare provided under the project is available only to children who would not otherwise receive it because they are from low-income families or for other reasons beyond their control, and unless it includes (subject to the limitation of the foregoing provisions of this sentence) at least such preventive services, treatment, correction of defects, and after care, for such age groups, as may be provided in regulations of the Secretary. Such projects may also include research looking toward the development of new methods of diagnosis or treatment, or demonstration of the utilization of dental personnel with various levels of training.

(b) No grant may be made under this section for any project for any period after June 30, 1974.



## TRAINING OF PERSONNEL

SEC. 511. From the sums available under clause (C) of paragraph (1) or clause (B) of paragraph (2) of section 502, the Secretary is authorized to make grants to public or nonprofit private institutions of higher learning for training personnel for health care and related services for mothers and children, particularly mentally retarded children and children with multiple handicaps. In making such grants, the Secretary shall give special attention to programs providing training at the undergraduate level.

RESEARCH PROJECTS RELATING TO MATERNAL AND CHILD HEALTH SERVICES  
AND CRIPPLED CHILDREN'S SERVICES

SEC. 512. From the sums available under clause (C) of paragraph (1) or clause (B) of paragraph (2) of section 502, the Secretary is authorized to make grants to or jointly financed cooperative arrangements with public or other nonprofit institutions of higher learning, and public or nonprofit private agencies and organizations engaged in research or in maternal and child health or crippled children's programs, and contracts with public or nonprofit private agencies and organizations engaged in research or in such programs, for research projects relating to maternal and child health services or crippled children's services which show promise of substantial contribution to the advancement thereof. Effective with respect to grants made and arrangements entered into after June 30, 1968, (1) special emphasis shall be accorded to projects which will help in studying the need for, and the feasibility, costs, and effectiveness of, comprehensive health care programs in which maximum use is made of health personnel with varying levels of training, and in studying methods of training for such programs, and (2) grants under this section may also include funds for the training of health personnel for work in such projects.

## ADMINISTRATION

SEC. 513. (a) The Secretary of Health, Education, and Welfare shall make such studies and investigations as will promote the efficient administration of this title.

(b) Such portion of the appropriations for grants under section 501 as the Secretary may determine, but not exceeding one-half of 1 percent thereof, shall be available for evaluation by the Secretary (directly or by grants or contracts) of the programs for which such appropriations are made and, in the case of allotments from any such appropriation, the amount available for allotments shall be reduced accordingly.

(c) Any agency, institution, or organization shall, if and to the extent prescribed by the Secretary, as a condition to receipt of grants under this title, cooperate with the State agency administering or supervising the administration of the State plan approved under title XIX in the provision of care and services, available under a plan or project under this title, for children eligible therefor under such plan approved under title XIX.

## DEFINITION

SEC. 514. For purposes of this title, a crippled child is an individual under the age of 21 who has an organic disease, defect, or condition which may hinder the achievement of normal growth and development.

## OBSERVANCE OF RELIGIOUS BELIEFS

SEC. 515. Nothing in this title shall be construed to require any State which has any plan or program approved under, or receiving financial support under, this title to compel any person to undergo any medical screening, examination, diagnosis, or treatment or to accept any other health care or services provided under such plan or program for any purpose (other than for the purpose of discovering and preventing the spread of infection or contagious disease or for the purpose of protecting environmental health), if such person objects (or, in case such person is a child, his parent or guardian objects) thereto on religious grounds.

## SUPPLEMENTAL ALLOTMENTS

SEC. 516. (a)(1) For each fiscal year (commencing with the fiscal year ending June 30, 1975), there shall (subject to paragraph (2)) be allotted to each State (from funds appropriated for such fiscal year pursuant to subsection (b)) an amount, which shall be in addition to and available for the same purposes as the allotments of such State (as determined under section 503 and 504), equal to the excess (if any) of—

(A) the amount of the allotment of such State (as determined under sections 503 and 504) for the fiscal year ending June 30, 1973, plus the amounts of any grants to such States under sections 508, 509, and 510, over

(B) the amount of the allotment of such State (as determined under sections 503 and 504) for such fiscal year which commences after June 30, 1973.

(2) No State shall receive an allotment under this section for any fiscal year, unless such State (in the administration of its State plan, approved under section 505) has in effect arrangements which the Secretary finds will provide for the continuation of appropriate services to population groups previously receiving services from funds made available (for the fiscal year ending June 30, 1974) to such State pursuant to sections 508, 509, and 510.

(b)(1)(A) There are (subject to subparagraph (B)) hereby authorized to be appropriated for each fiscal year (commencing with the fiscal year ending June 30, 1975) such amounts as may be necessary to enable the Secretary to make the allotments authorized under subsection (a).

(B) Nothing contained in subparagraph (A) shall be construed to authorize, for any fiscal year, the appropriation under this subsection of any amount which is in excess of the amount by which—

(i) the amount authorized to be appropriated under section 501 for such year exceeds

(ii) the total amounts appropriated pursuant to section 501 for such year.

(2) If, for any fiscal years, the total amount appropriated pursuant to paragraph (1) is less than the total amount allotted to all States under subsection (a), then the amount of the allotment of each State (as determined under subsection (a)) shall be reduced to an amount which bears the same ratio to the total amount appropriated pursuant to paragraph (1) for such fiscal year as the amount of the allotment of such State (as determined under subsection (a)) bears to the total amount allotted to all States under subsection (a) for such fiscal year.

#### SEC. 1003. (a)

(1) in the case of any State other than Puerto Rico, the Virgin Islands, and Guam, an amount equal to the sum of the following proportions of the total amounts expended during such quarter as aid to the blind under the State plan (including expenditures for premiums under part B of title XVIII for individuals who are recipients of money payments under such plan and other insurance premiums for medical or any other type of remedial care or the cost thereof)—

(A)  $\frac{31}{37}$  of such expenditures, not counting so much of any expenditure with respect to any month as exceeds the product of \$37 multiplied by the total number of recipients of aid to the blind for such month (which total number, for purposes of this subsection, means (i) the number of individuals who received aid to the blind in the form of money payments for such month, plus (ii) the number of other individuals with respect to whom expenditures were made in such month as aid to the blind in the form of medical or any other type of remedial care); plus

(B) the Federal percentage of the amount by which such expenditures exceed the maximum which may be counted under clause (A), not counting so much of any expenditure with respect to any month as exceeds the product of \$75 multiplied by the total number of such recipients of aid to the blind for such month; and

(3) in the case of any State whose State plan approved under section 1002 meets the requirements of subsection (c)(1), an amount equal to the sum of the following proportions of the total amounts expended during such quarter as found necessary by the Secretary of Health, Education, and Welfare for the proper and efficient administration of the State plan—

(A) 75 per centum of so much of such expenditures as are for—

(i) services which are prescribed pursuant to subsection (c)(1) and are provided (in accordance with the next sentence) to applicants for or recipients of aid to the blind to help them attain or retain capability for self-support or self-care, or

(ii) other services, specified by the Secretary as likely to prevent or reduce dependency, so provided to such applicants or recipients, or

(iii) any of the services prescribed pursuant to subsection (c)(1), and of the services specified as provided in clause (ii), which the Secretary may specify as appropriate for individuals who, within such period or periods as the Secretary may prescribe, have been or are likely to become applicants for or recipients of aid to the blind, if such services are requested by such individuals and are provided to such individuals in accordance with the next sentence, or

(iv) the training (including both short- and long-term training at educational institutions through grants to such institutions or by direct financial assistance to students enrolled in such institutions) of personnel



employed or preparing for employment by the State agency or by the local agency administering the plan in the political subdivision; plus

(B) one-half of so much of such expenditures (not included under subparagraph (A)) as are for services provided (in accordance with the next sentence) to applicants for or recipients of aid to the blind, and to individuals requesting such services who (within such period or periods as the Secretary may prescribe) have been or are likely to become applicants for or recipients of such aid; plus

(C) one-half of the remainder of such expenditures.

The services referred to in subparagraphs (A) and (B) shall, except to the extent specified by the Secretary, include only—

(D) services provided by the staff of the State agency, or of the local agency administering the State plan in the political subdivision: *Provided*, That no funds authorized under this title shall be available for services defined as vocational rehabilitation services under the Vocational Rehabilitation Act (i) which are available to individuals in need of them under programs for their rehabilitation carried on under a State plan approved under such Act, or (ii) which the State agency or agencies administering or supervising the administration of the State plan approved under such Act are able and willing to provide if reimbursed for the cost thereof pursuant to agreement under subparagraph (E), if provided by such staff, and

(E) under conditions which shall be prescribed by the Secretary, services which in the judgment of the State agency cannot be as economically or as effectively provided by the staff of such State or local agency and are not otherwise reasonably available to individuals in need of them, and which are provided, pursuant to agreement with the State agency, by the State health authority or the State agency or agencies administering or supervising the administration of the State plan for vocational rehabilitation services approved under the Vocational Rehabilitation Act or by any other State agency which the Secretary may determine to be appropriate (whether provided by its staff or by contract with public (local) or nonprofit private agencies);

except that services described in clause (ii) of subparagraph (D) hereof may be provided only pursuant to agreement with such State agency or agencies administering or supervising the administration of the State plan for vocational rehabilitation services so approved. The portion of the amount expended for administration of the State plan to which subparagraph (A) applies and the portion thereof to which subparagraphs (B) and (C) apply shall be determined in accordance with such methods and procedures as may be permitted by the Secretary; and

(4) in the case of any State whose State plan approved under section 1002 does not meet the requirements of subsection (c)(1), an amount equal to one-half of the total of the sums expended during such quarter as found necessary by the Secretary for the proper and efficient administration of the State plan, including services referred to in paragraph (3) and provided in accordance with the provisions of such paragraph.

(c)(1) In order for a State to qualify for payments under paragraph (3) of subsection (a), its State plan approved under section 1002 must provide that the State agency shall make available to applicants for or recipients of aid to the blind at least those services to help them attain or retain capability for self-support or self-care which are prescribed by the Secretary.

(2) In the case of any State whose State plan included a provision meeting the requirements of paragraph (1), but with respect to which the Secretary finds, after reasonable notice and opportunity for hearing to the State agency administering or supervising the administration of such plan, that—

(A) the provision has been so changed that it no longer complies with the requirements of paragraph (1), or

(B) in the administration of the plan there is a failure to comply substantially with such provision,

the Secretary shall notify such State agency that further payments will not be made to the State under paragraph (3) of subsection (a) until he is satisfied that there will no longer be any such failure to comply. Until the Secretary is so satisfied further payments with respect to the administration of such State plan shall not be made under paragraph (3) of subsection (a) but shall instead be made, subject to the other provisions of this title, under paragraph (4) of such subsection.

#### SEC. 1108.

(c) The total amount certified by the Secretary under title XIX with respect to any fiscal year—

(1) for payment to Puerto Rico shall not exceed \$30,000,000,



- (2) for payment to the Virgin Islands shall not exceed \$1,000,000, and  
 (3) for payment to Guam shall not exceed \$900,000.

## SEC. 1124.

- (a)  
 (2)

(D) an entity (other than an individual practitioner or group of practitioners) that furnishes, or arranges for the furnishing of, health related services with respect to which payment may be claimed by the entity under a State plan or program approved under title XX.

## SEC. 1152.

(h)(1) During the development and preparation by an organization of its formal plan under subsection (b)(2) or of any modification of such plan to include review of services in skilled nursing facilities (as defined in section 1861(j)) or intermediate care facilities (as defined in section 1905(c)) or review of ambulatory care services, the organization shall consult with the single State agency responsible for administering or supervising the administration of the State plan approved under title XIX for the State in which the organization is located.

(2) Such plan and any such modification shall be submitted to the Governor of such State, at the time of its submission to the Secretary, for his comments.

(3) The Secretary, before making the findings described in subsection (b)(2) or a finding regarding the organization's capability to perform review of such services (as the case may be), shall consider any such comments submitted to him by such Governor before the end of the thirty-day period beginning on the date of submission of the plan or of any such modification (as the case may be).

(4) If, after considering such comments, the Secretary intends to make findings which are adverse to such comments, the Secretary shall provide the Governor making such comments with the opportunity to submit additional evidence and comments on such intended findings during a period of not less than thirty days ending before the findings became effective.

## SEC. 1154.

(e) In determining whether an organization designated on a conditional basis as the Professional Standards Review Organization for any area is substantially carrying out its duties in a satisfactory manner and should be considered a qualified organization, the Secretary shall follow the procedures specified in section 1152(h) (concerning the Secretary's consideration of comments of the Governor of the State in which the organization is located).

(f)

(2) In order to demonstrate the cost-effectiveness of requiring review of particular health care services before such review is generally required, the program shall be designed in a manner so that the Secretary will require particular Professional Standards Review Organizations, chosen by a statistically valid method that will permit a valid evaluation of the cost-effectiveness of such review, to review particular health care services.

(3) The program shall provide for the evaluation of cost-effectiveness of the review of particular health care services under the program, particularly in comparison with areas in which such review was not required or performed.

(2)<sup>18</sup> Based upon such evaluation, or upon an evaluation of comparable statistical validity, and a finding that review of particular health care services is cost-effective or yields other significant benefits, the Secretary shall specify such particular health care services which Professional Standards Review Organizations (either generally or under such conditions and circumstances as the Secretary may specify) have the duty and function of reviewing under this part.

## SEC. 1155. (a)

(7)(A) Except as provided in subparagraph (B), a Professional Standards Review Organization located in a State has the function and duty to assume responsibility for the review under paragraph (1) of professional activities in intermediate care facilities (as defined in section 1905(c)) and in public institutions for the mentally retarded (described in section 1905(d)(1)) only, consistent with section 1154(f), if (i) the Secretary finds, on the basis of such documentation as he may require from the State, that the single State agency which administers or supervises the administration of the State plan approved under title XIX for that State is not performing effective review of the quality and necessity of health care services provided in such facilities and institutions, or (ii) the State requests such organization to assume such responsibility.

<sup>18</sup>P.L. 97-35, §2112(b)(2)(C), redesignated paragraph (4) as paragraph (2) and amended paragraph (2) in its entirety, effective August 13, 1981.

(B) A Professional Standards Review Organization located in a State has the function and duty to assume responsibility for the review under paragraph (1) of professional activities in intermediate care facilities in the State that are also skilled nursing facilities (as defined in section 1861(j)), to the extent (consistent with section 1154(f)) that the Secretary finds that the performance of such function by the single State agency (described in subparagraph (A)) for that State is inefficient.

(i) Any Professional Standards Review Organization which has assumed responsibility under this section for review of inpatient hospital services in an area shall also assume responsibility in such area for review of detoxification facility services.

#### SEC. 1158.

(e) Subsection (a) of this section shall not apply to a determination by a Professional Standards Review Organization under section 1155(a)(1)(C) that detoxification services provided or proposed to be provided in a hospital on an inpatient basis could be more economically provided in a detoxification facility.

#### APPLICATION OF THIS PART TO CERTAIN STATE PROGRAMS RECEIVING FEDERAL FINANCIAL ASSISTANCE

SEC. 1164. (a) In addition to the requirements imposed by law as a condition of approval of a State plan approved under any title of this Act under which health care services are paid for in whole or part, with Federal funds, there is hereby imposed the requirement that provisions of this part shall apply to the operation of such plan or program.

(b) The requirement imposed by subsection (a) with respect to such State plans approved under this Act shall apply—

(1) in the case of any such plan where legislative action by the State legislature is not necessary to meet such requirement, on and after January 1, 1974; and

(2) in the case of any such plan where legislative action by the State legislature is necessary to meet such requirement, whichever of the following is earlier—

(A) on and after July 1, 1974, or

(B) on and after the first day of the calendar month which first commences more than ninety days after the close of the first regular session of the legislature of such State which begins after December 31, 1973.

#### SEC. 1168.

(c) funds appropriated to carry out the health care provisions of the several titles of this Act;

#### MEMORANDUMS OF UNDERSTANDING; FEDERAL-STATE RELATIONS GENERALLY

SEC. 1171. (a)(1) Except as provided in paragraph (2), no determination made by a Professional Standards Review Organization pursuant to paragraphs (1) and (2) of section 1155(a) in connection with reviews shall constitute conclusive determinations under section 1158(c) for purposes of payment under title XIX, unless such organization has entered into a memorandum of understanding, approved by the Secretary, with the single State agency responsible for administering or supervising the administration of the State plan approved under title XIX for the State in which the organization is located (hereinafter in this section referred to as the "State agency") for the purpose of delineating the relationship between the organization and the State agency and of providing for the exchange of data or information, and for administrative procedures, coordination mechanisms, and modification of the memorandum at any time that additional responsibility for review by the organization is authorized by the Secretary.

(2) The requirement of paragraph (1) may be waived by the Secretary if (A) the State agency indicates to the Secretary that it does not wish to enter into a memorandum of understanding with the organization involved, or (B) the Secretary finds that the State agency has refused to negotiate in good faith or in a timely manner with the organization involved.

(b)(1) The State agency may request a Professional Standards Review Organization which is entering into such a memorandum of understanding with the agency to include in the memorandum a specification of review goals or methods (additional to any such goals or methods contained in the organization's formal plan) for the performance of the organization's duties and functions under this part.

(2) If the agency and the organization cannot reach agreement regarding the inclusion of any such requested specification, the Secretary shall review such specification and shall require that the specification be included in the memorandum to the extent that the Secretary determines that such specification of goals or methods (A) is consistent with the functions of the organization under this part and with the provisions of title XIX and the State's plan approved under such title, and (B) does not



seriously impact on the effectiveness and uniformity of the organization's review of health care services paid for under title XVIII and title XIX of this Act.

(c) Notwithstanding any other provision of this Act, the State agency may contract with any Professional Standards Review Organization located in the State for the performance of review responsibilities in addition to those performed pursuant to this part (and the cost of performance of such additional responsibilities is reimbursable as an expense of the State agency under section 1903(a)) if—

(1) the State agency formally requests the performance of such additional responsibilities, and

(2) the performance of such additional responsibilities is not inconsistent with this part and is provided for in an amendment to the State's plan which is approved by the Secretary under title XIX.

(d)(1) Each State agency may monitor the performance of review responsibilities by Professional Standards Review Organizations located within the State, in accordance with a State monitoring plan which is developed after review and comment by such organizations and is approved by the Secretary. The costs of activities of the State agency under and in accordance with such plan are reimbursable as an expense of the State agency under section 1903(a).

(2) A monitoring plan developed and approved under paragraph (1) may include a specification of performance criteria for judging the effectiveness of the review performance of the Professional Standards Review Organizations. If the State agency and the Professional Standards Review Organizations cannot reach agreement regarding such criteria, the Secretary shall assist the agency and organizations in resolving the matters in dispute.

(3)(A) Whenever a State agency monitoring the performance of review responsibilities by a Professional Standards Review Organization under a plan developed and approved under paragraph (1) submits to the Secretary reasonable documentation that the review determinations of such organization have caused an unreasonable and detrimental impact on total State expenditures under title XIX and on the appropriateness of care received by individuals under the State's plan approved under such title, and requests the Secretary to act, the Secretary shall, within thirty days from the date of receipt of the documentation, make a determination as to the reasonableness of the allegation by the State agency. If the Secretary determines that the review determinations of such organization have caused an unreasonable and detrimental impact on total State expenditures under title XIX and on the appropriateness of care received by individuals under the State's plan approved under such title, unless the Secretary determines that the organization has taken appropriate corrective action, he shall immediately suspend such organization's authority in whole or in part under section 1158(c) to make conclusive determinations for purposes of payment under title XIX (and he may suspend such authority for purposes of payment under title XVIII) until he (i) reevaluates such organization's performance of the responsibilities involved and determines that such performance does not have such unreasonable and detrimental impact, or (ii) determines that the organization has taken appropriate corrective action. Any determination made by the Secretary under this subparagraph shall be final and shall not be subject to judicial review.

(B) The Secretary shall notify the State agency submitting such documentation, and the organization involved, in writing, of his determination, any subsequent actions taken, and the basis thereof, and shall notify the appropriate committees of the United States House of Representatives and the Senate of any such documentation submitted and the actions taken.

(e)(1) The Secretary shall in a timely manner establish procedures and mechanisms to govern his relationships with State agencies under this part (specifically including his relationships with such agencies in connection with their respective functions under the preceding provisions of this section). Such mechanisms shall include periodic consultation by the Secretary with State agency representatives and representatives of Professional Standards Review Organizations regarding relationships between such agencies and such organizations (including the appropriate exchange of data and information between such agencies and such organizations) and other problems of mutual concern, and such procedures shall permit the State agency to be represented on any project assessments conducted by the Secretary with respect to a Professional Standards Review Organization located within its State.

(2) Each Professional Standards Review Organization shall provide to the State agency for the State in which it is located, upon request, data or information which the Secretary requires such organizations to report to him routinely on a periodic basis, and such other data or information as the Secretary authorizes to be disclosed.

#### SEC. 1403. (a)

(1) in the case of any State other than Puerto Rico, the Virgin Islands, and Guam, an amount equal to the sum of the following proportions of the total



amounts expended during such quarter as aid to the permanently and totally disabled under the State plan (including expenditures for premiums under part B of title XVIII for individuals who are recipients of money payments under such plan and other insurance premiums for medical or any other type of remedial care or the cost thereof)—

(A) 31/37 of such expenditures, not counting so much of any expenditure with respect to any month as exceeds the product of \$37 multiplied by the total number of recipients of aid to the permanently and totally disabled for such month (which total number, for purposes of this subsection, means (i) the number of individuals who received aid to the permanently and totally disabled in the form of money payments for such month, plus (ii) the number of other individuals with respect to whom expenditures were made in such month as aid to the permanently and totally disabled in the form of medical or any other type of remedial care); plus

(B) the Federal percentage of the amount by which such expenditures exceed the maximum which may be counted under clause (A), not counting so much of any expenditure with respect to any month as exceeds the product of \$75 multiplied by the total number of such recipients of aid to the permanently and totally disabled for such month; and

(3) in the case of any State whose State plan approved under section 1402 meets the requirements of subsection (c)(1), an amount equal to the sum of the following proportions of the total amounts expended during such quarter as found necessary by the Secretary of Health, Education, and Welfare for the proper and efficient administration of the State plan—

(A) 75 per centum of so much of such expenditures as are for—

(i) services which are prescribed pursuant to subsection (c)(1) and are provided (in accordance with the next sentence) to applicants for or recipients of aid to the permanently and totally disabled to help them attain or retain capability for self-support or self-care, or

(ii) other services, specified by the Secretary as likely to prevent or reduce dependency, so provided to such applicants or recipients, or

(iii) any of the services prescribed pursuant to subsection (c)(1), and of the services specified as provided in clause (ii), which the Secretary may specify as appropriate for individuals who, within such period or periods as the Secretary may prescribe, have been or are likely to become applicants for or recipients of aid to the permanently and totally disabled, if such services are requested by such individuals and are provided to such individuals in accordance with the next sentence, or

(iv) the training (including both short- and long-term training at educational institutions through grants to such institutions or by direct financial assistance to students enrolled in such institutions) of personnel employed or preparing for employment by the State agency or by the local agency administering the plan in the political subdivision; plus

(B) one-half of so much of such expenditures (not included under subparagraph (A)) as are for services provided (in accordance with the next sentence) to applicants for or recipients of aid to the permanently and totally disabled, and to individuals requesting such services who (within such period or periods as the Secretary may prescribe) have been or are likely to become applicants for or recipients of such aid; plus

(C) one-half of the remainder of such expenditures.

The services referred to in subparagraphs (A) and (B) shall, except to the extent specified by the Secretary, include only—

(D) services provided by the staff of the State agency, or of the local agency administering the State plan in the political subdivision: *Provided*, That no funds authorized under this title shall be available for services defined as vocational rehabilitation services under the Vocational Rehabilitation Act (i) which are available to individuals in need of them under programs for their rehabilitation carried on under a State plan approved under such Act, or (ii) which the State agency or agencies administering or supervising the administration of the State plan approved under such Act are able and willing to provide if reimbursed for the cost thereof pursuant to agreement under subparagraph (E), if provided by such staff, and

(E) under conditions which shall be prescribed by the Secretary, services which in the judgment of the State agency cannot be as economically or as effectively provided by the staff of such State or local agency and are not otherwise reasonably available to individuals in need of them, and which are provided, pursuant to agreement with the State agency, by the State health authority or the State agency or agencies administering or supervising the

administration of the State plan for vocational rehabilitation services approved under the Vocational Rehabilitation Act or by any other State agency which the Secretary may determine to be appropriate (whether provided by its staff or by contract with public (local) or nonprofit private agencies); except that services described in clause (ii) of subparagraph (D) hereof may be provided only pursuant to agreement with such State agency or agencies administering or supervising the administration of the State plan for vocational rehabilitation services so approved. The portion of the amount expended for administration of the State plan to which subparagraph (A) applies and the portion thereof to which subparagraphs (B) and (C) apply shall be determined in accordance with such methods and procedures as may be permitted by the Secretary; and

(4) in the case of any State whose State plan approved under section 1402 does not meet the requirements of subsection (c)(1), an amount equal to one-half of the total of the sums expended during such quarter as found necessary by the Secretary for the proper and efficient administration of the State plan, including services referred to in paragraph (3) and provided in accordance with the provisions of such paragraph.

(c)(1) In order for a State to qualify for payments under paragraph (3) of subsection (a), its State plan approved under section 1402 must provide that the State agency shall make available to applicants for or recipients of aid to the permanently and totally disabled at least those services to help them attain or retain capability for self-support or self-care which are prescribed by the Secretary.

(2) In the case of any State whose State plan included a provision meeting the requirements of paragraph (1), but with respect to which the Secretary finds, after reasonable notice and opportunity for hearing to the State agency administering or supervising the administration of such plan, that—

(A) the provision has been so changed that it no longer complies with the requirements of paragraph (1), or

(B) in the administration of the plan there is a failure to comply substantially with such provision,

the Secretary shall notify such State agency that further payments will not be made to the State under paragraph (3) of subsection (a) until he is satisfied that there will no longer be any such failure to comply. Until the Secretary is so satisfied further payments with respect to the administration of such State plan shall not be made under paragraph (3) of subsection (a) but shall instead be made, subject to the other provisions of this title, under paragraph (4) of such subsection.

#### **[Title—XVI—State]**

Sec. 1601. and<sup>19</sup> (b) of enabling each State, as far as practicable under the conditions in such State, to furnish medical assistance on behalf of individuals who are 65 years of age or over and who are not recipients of aid to the aged, blind, or disabled but whose income and resources are insufficient to meet the costs of necessary medical services, and (c) of encouraging each State, as far as practicable under the conditions in such State, to furnish rehabilitation and other services to help individuals referred to in clause (a) or (b) to attain or retain capability for self-support or self-care

#### **Sec. 1602. (a)**

(15) if the State plan includes medical assistance for the aged—

(A) provide for inclusion of some institutional and some noninstitutional care and services;

(B) provide that no enrollment fee, premium, or similar charge will be imposed as a condition of any individual's eligibility for medical assistance for the aged under the plan;

(C) provide for inclusion, to the extent required by regulations prescribed by the Secretary, of provisions (conforming to such regulations) with respect to the furnishing of such assistance to individuals who are residents of the State but are absent therefrom; and

(D) provide that no lien may be imposed against the property of any individual prior to his death on account of medical assistance for the aged paid or to be paid on his behalf under the plan (except pursuant to the judgment of a court on account of benefits incorrectly paid on behalf of such individual), and that there shall be no adjustment or recovery (except, after the death of such individual and his surviving spouse, if any, from such individual's estate) of any medical assistance for the aged correctly paid on behalf of such individual under the plan;

(16) if the State plan includes aid or assistance to or in behalf of individuals 65 years of age or older who are patients in institutions for mental diseases—

<sup>19</sup>P.L. 97-35, §2353(m)(1)(A), inserted "and", effective October 1, 1981.



(A) provide for having in effect such agreements or other arrangements with State authorities concerned with mental diseases, and, where appropriate, with such institutions, as may be necessary for carrying out the State plan, including arrangements for joint planning and for development of alternate methods of care, arrangements providing assurance of immediate readmittance to institutions where needed for individuals under alternate plans of care, and arrangements providing for access to patients and facilities, for furnishing information, and for making reports;

(B) provide for an individual plan for each such patient to assure that the institutional care provided to him is in his best interests, including, to that end, assurances that there will be initial and periodic review of his medical and other needs, that he will be given appropriate medical treatment within the institution, and that there will be a periodic determination of his need for continued treatment in the institution;

(C) provide for the development of alternate plans of care, making maximum utilization of available resources, for recipients 65 years of age or older who would otherwise need care in such institutions, including appropriate medical treatment and other aid or assistance; for services referred to in section 1603(a)(4)(A)(i) and (ii) which are appropriate for such recipients and for such patients; and for methods of administration necessary to assure that the responsibilities of the State agency under the State plan with respect to such recipients and such patients will be effectively carried out; and

(D) provide methods of determining the reasonable cost of institutional care for such patients; and

(17) if the State plan includes aid or assistance to or in behalf of individuals 65 years of age or older who are patients in public institutions for mental diseases, show that the State is making satisfactory progress toward developing and implementing a comprehensive mental health program, including provision for utilization of community mental health centers, nursing homes, and other alternatives to care in public institutions for mental diseases.

(b) (2) (B) in the case of applicants for medical assistance for the aged, excludes any individual who resides in the State

#### SEC. 1603. (a)

(1) in the case of any State other than Puerto Rico, the Virgin Islands, and Guam, an amount equal to the sum of the following proportions of the total amounts expended during each month of such quarter as aid to the aged, blind, or disabled under the State plan (including expenditures for premiums under part B of title XVIII for individuals who are recipients of money payments under such plan and other insurance premiums for medical or any other type of remedial care or the cost thereof)—

(A)  $31/37$  of such expenditures, not counting so much of any expenditure with respect to such month as exceeds the product of \$37 multiplied by the total number of recipients of such aid for such month (which total number, for purposes of this subsection, means (i) the number of individuals who received such aid in the form of money payments for such month, plus (ii) the number of other individuals with respect to whom expenditures were made in such month as aid to the aged, blind, or disabled in the form of medical or any other type of remedial care); plus

(B) the larger of the following:

(i)(I) the Federal percentage (as defined in section 1101(a)(8)) of the amount by which such expenditures exceed the amount which may be counted under clause (A), not counting so much of such excess with respect to such month as exceeds the product of \$38 multiplied by the total number of recipients of aid to the aged, blind, or disabled for such month, plus (II) 15 per centum of the total expended during such month as aid to the aged, blind, or disabled under the State plan in the form of medical or any other type of remedial care, not counting so much of such expenditure with respect to such month as exceeds the product of \$15 multiplied by the total number of recipients of aid to the aged, blind, or disabled for such month, or

(ii)(I) the Federal medical percentage (as defined in section 6(c)) of the amount by which such expenditures exceed the maximum which may be counted under clause (A), not counting so much of any expenditures with respect to such month as exceeds (a) the product of \$52 multiplied by the total number of such recipients of aid to the aged, blind, or disabled for such month, or (b) if smaller, the total expended as aid to the aged, blind,



or disabled in the form of medical or any other type of remedial care with respect to such month plus the product of \$37 multiplied by such total number of such recipients, plus (II) the Federal percentage of the amount by which the total expended during such month as aid to the aged, blind, or disabled under the State plan exceeds the amount which may be counted under clause (A) and the preceding provisions of this clause (B)(ii), not counting so much of such excess with respect to such month as exceeds the product of \$38 multiplied by the total number of such recipients of aid to the aged, blind, or disabled for such month;

(2)

(B) (II) if smaller, the total expended as aid to the aged, blind, or disabled in the form of medical or any other type of remedial care with respect to such month plus the product of \$37.50 multiplied by the total number of such recipients, or (ii) 15 per centum of the total of the sums expended during such quarter as aid to the aged, blind, or disabled under the State plan in the form of medical or any other type of remedial care, not counting so much of any expenditure with respect to any month as exceeds the product of \$7.50 multiplied by the total number of such recipients of aid to the aged, blind, or disabled for such month

(3) in the case of any State, an amount equal to the Federal medical percentage (as defined in section 6(c)) of the total amounts expended during such quarter as medical assistance for the aged under the State plan (including expenditures for insurance premiums for medical or any other type of remedial care or the cost thereof); and

(4) in the case of any State whose State plan approved under section 1602 meets the requirements of subsection (c)(1), an amount equal to the sum of the following proportions of the total amounts expended during such quarter as found necessary by the Secretary of Health, Education, and Welfare for the proper and efficient administration of the State plan—

(A) 75 per centum of so much of such expenditures as are for—

(i) services which are prescribed pursuant to subsection (c)(1) and are provided (in accordance with the next sentence) to applicants for or recipients of aid or assistance under the plan to help them attain or retain capability for self-support or self-care, or

(ii) other services, specified by the Secretary as likely to prevent or reduce dependency, so provided to such applicants or recipients, or

(iii) any of the services prescribed pursuant to subsection (c)(1), and of the services specified as provided in clause (ii), which the Secretary may specify as appropriate for individuals who, within such period or periods as the Secretary may prescribe, have been or are likely to become applicants for or recipients of aid or assistance under the plan, if such services are requested by such individuals and are provided to such individuals in accordance with the next sentence, or

(iv) the training (including both short- and long-term training at educational institutions through grants to such institutions or by direct financial assistance to students enrolled at such institutions) of personnel employed or preparing for employment by the State agency or by the local agency administering the plan in the political subdivision; plus

(B) one-half of so much of such expenditures (not included under subparagraph (A)) as are for services provided (in accordance with the next sentence) to applicants for or recipients of aid or assistance under the plan, and to individuals requesting such services who (within such period or periods as the Secretary may prescribe) have been or are likely to become applicants for or recipients of such aid or assistance; plus

(C) one-half of the remainder of such expenditures.

The services referred to in subparagraphs (A) and (B) shall, except to the extent specified by the Secretary, include only—

(D) services provided by the staff of the State agency, or of the local agency administering the State plan in the political subdivision: *Provided*, That no funds authorized under this title shall be available for services defined as vocational rehabilitation services under the Vocational Rehabilitation Act (i) which are available to individuals in need of them under programs for their rehabilitation carried on under a State plan approved under such Act, or (ii) which the State agency or agencies administering or supervising the administration of the State plan approved under such Act are able and willing to provide if reimbursed for the cost thereof pursuant to agreement under subparagraph (E), if provided by such staff, and

(E) under conditions which shall be prescribed by the Secretary, services which in the judgment of the State agency cannot be as economically or as effectively provided by the staff of such State or local agency and are not otherwise reasonably available to individuals in need of them, and which are provided, pursuant to agreement with the State agency, by the State health authority or the State agency or agencies administering or supervising the administration of the State plan for vocational rehabilitation services approved under the Vocational Rehabilitation Act or by any other State agency which the Secretary may determine to be appropriate (whether provided by its staff or by contract with public (local) or nonprofit private agencies); except that services described in clause (ii) of subparagraph (D) hereof may be provided only pursuant to agreement with such State agency or agencies administering or supervising the administration of the State plan for vocational rehabilitation services so approved. The portion of the amount expended for administration of the State plan to which subparagraph (A) applies and the portion thereof to which subparagraphs (B) and (C) apply shall be determined in accordance with such methods and procedures as may be permitted by the Secretary; and

(5) in the case of any State whose State plan approved under section 1602 does not meet the requirements of subsection (c)(1), an amount equal to one-half of the total of the sums expended during such quarter as found necessary by the Secretary for the proper and efficient administration of the State plan, including services referred to in paragraph (4) and provided in accordance with the provisions of such paragraph.

(c)(1) In order for a State to qualify for payments under paragraph (4) of subsection (a), its State plan approved under section 1602 must provide that the State agency shall make available to applicants for or recipients of aid to the aged, blind, or disabled under such State plan at least those services to help them attain or retain capability for self-support or self-care which are prescribed by the Secretary.

(2) In the case of any State whose State plan included a provision meeting the requirements of paragraph (1), but with respect to which the Secretary finds, after reasonable notice and opportunity for hearing to the State agency administering or supervising the administration of such plan, that—

(A) the provision has been so changed that it no longer complies with the requirements of paragraph (1), or

(B) in the administration of the plan there is a failure to comply substantially with such provision,

the Secretary shall notify such State agency that further payments will not be made to the State under paragraph (4) of subsection (a) until he is satisfied that there will no longer be any such failure to comply. Until the Secretary is so satisfied further payments with respect to the administration of such State plan shall not be made under paragraph (4) of subsection (a) but shall instead be made, subject to the other provisions of this title, under paragraph (5) of such subsection.

(d) Notwithstanding the preceding provisions of this section, the amount determined under such provisions for any State for any quarter which is attributable to expenditures with respect to individuals 65 years of age or older who are patients in institutions for mental diseases shall be paid only to the extent that the State makes a showing satisfactory to the Secretary that total expenditures in the State from Federal, State, and local sources for mental health services (including payments to or in behalf of individuals with mental health problems) under State and local public health and public welfare programs for such quarter exceed the average of the total expenditures in the State from such sources for such services under such programs for each quarter of the fiscal year ending June 30, 1965. For purposes of this subsection, expenditures for such services for each quarter in the fiscal year ending June 30, 1965, in the case of any State shall be determined on the basis of the latest data, satisfactory to the Secretary, available to him at the time of the first determination by him under this subsection for such State; and expenditures for such services for any quarter beginning after December 31, 1965, in the case of any State shall be determined on the basis of the latest data, satisfactory to the Secretary, available to him at the time of the determination under this subsection for such State for such quarter; and determinations so made shall be conclusive for purposes of this subsection.

#### SEC. 1605.

(b) For purposes of this title, the term "medical assistance for the aged" means payment of part or all of the cost of the following care and services (if provided in or after the third month before the month in which the recipient makes application for assistance) for individuals who are sixty-five years of age or older and who are not recipients of aid to the aged, blind, or disabled (except, for any month, for recipients of aid to the aged, blind, or disabled who are admitted to or discharged from a medical



institution during such month) but whose income and resources are insufficient to meet all of such cost—

- (1) inpatient hospital services;
- (2) skilled nursing-home services;
- (3) physicians' services;
- (4) outpatient hospital or clinic services;
- (5) home health care services;
- (6) private duty nursing services;
- (7) physical therapy and related services;
- (8) dental services;
- (9) laboratory and X-ray services;
- (10) prescribed drugs, eyeglasses, dentures, and prosthetic devices;
- (11) diagnostic, screening, and preventive services; and
- (12) any other medical care or remedial care recognized under State law;

except that such term does not include any such payments with respect to care or services for any individual who is an inmate of a public institution (except as a patient in a medical institution).

#### [Title XVI—SSI]

##### Sec. 1611.

##### Period for Determination of Benefits

(c)(1) An individual's eligibility for benefits under this title and the amount of such benefits shall be determined for each quarter of a calendar year except that, if the initial application for benefits is filed in the second or third month of a calendar quarter, such determinations shall be made for each month in such quarter. Eligibility for and the amount of such benefits for any quarter shall be redetermined at such time or times as may be provided by the Secretary.

(2) For purposes of this subsection an application shall be considered to be effective as of the first day of the month in which it was actually filed.

##### Sec. 1615.

(b)(1) The Secretary shall by regulation prescribe criteria for approval of State plans for—

(A) assuring appropriate counseling for disabled children referred pursuant to subsection (a) and their families,

(B) establishment of individual service plans for such disabled children, and prompt referral to appropriate medical, educational, and social services,

(C) monitoring to assure adherence to such service plans, and

(D) provision for such disabled children who are 6 years of age and under, or who have never attended public school and require preparation to take advantage of public educational services, of medical, social, developmental, and rehabilitative services, in cases where such services reasonably promise to enhance the child's ability to benefit from subsequent education or training, or otherwise to enhance his opportunities for self-sufficiency or self-support as an adult.

(2) Such criteria shall include—

(A) administration—

(i) by the agency administering the State plan for crippled children's services under title V of this Act, or

(ii) by another agency which administers programs providing services to disabled children and which the Governor of the State concerned has determined is capable of administering the State plan described in the first sentence of this subsection in a more efficient and effective manner than the agency described in clause (i) (with the reasons for such determination being set forth in the State plan described in the first sentence of this subsection);

(B) coordination with other agencies serving disabled children; and

(C) establishment of an identifiable unit within such agency which shall be responsible for carrying out the plan.

(e)(1) The Secretary shall, subject to the limitations imposed by paragraphs (2) and (3) and subject to section 2194(b)(3) of the Maternal and Child Health Services Block Grant Act<sup>20</sup>, pay to the State agency administering a State plan of a State under subsection (b) of this section, the costs incurred each fiscal year which begins after September 30, 1976, and ends prior to October 1, 1982, in carrying out the State plan approved pursuant to such subsection (b).

(2)(A) Of the funds paid by the Secretary with respect to costs, incurred in any State, to which paragraph (1) applies, not more than 10 per centum thereof shall be paid with

<sup>20</sup>P.L. 97-35, §2193(a)(4)(A), inserted "and subject to section 2194(b)(3) of the Maternal and Child Health Services Block Grant Act".



respect to costs incurred with respect to activities described in subsection (b)(1)(A), (B), and (C).

(B) Whenever there are provided pursuant to this section to any child services of a type which is appropriate for children who are not blind or disabled, there shall be disregarded for purposes of computing any payment with respect thereto under this subsection, so much of the costs of such services as would have been incurred if the child involved had not been blind or disabled.

(C) The total amount payable under this subsection for any fiscal year, with respect to services provided in any State, shall be reduced by the amount by which the sum of the public funds expended (as determined by the Secretary) from non-Federal sources for services of the type involved for such fiscal year is less than the sum of such funds expended from such sources for services of such type for the fiscal year ending June 30, 1976.

(3) No payment under this subsection with respect to costs incurred in providing services in any State for any fiscal year shall exceed an amount which bears the same ratio to \$24,070,000<sup>21</sup> as the under age 7 population of such State (and for purposes of this section the District of Columbia shall be regarded as a State) bears to the under age 7 population of the fifty States and the District of Columbia. The Secretary shall promulgate the limitation applicable to each State for each fiscal year under this paragraph on the basis of the most recent satisfactory data available from the Department of Commerce not later than 90 nor earlier than 270 days before the beginning of such year.

SEC. 1812. (a)

(4) alcohol detoxification facility services.

SEC. 1814. (a)

(2)

(F) in the case of alcohol detoxification facility services, such services are required on an inpatient basis (based upon an examination by such certifying physician made prior to initiation of alcohol detoxification);

SEC. 1833. (a)

(2)

(A) with respect to home health services and to items and services described in section 1861(s)(10), the reasonable cost of such services, as determined under section 1861(v);

(B) with respect to other services (except those described in subparagraph (C) of this paragraph), the reasonable costs of such services, as so determined, less the amount a provider may charge as described in clause (ii) of section 1866(a)(2)(A), but in no case may the payment for such other services exceed 80 percent of such costs; and

(b)(1) the amount of the deductible for such calendar year as so determined shall first be reduced by the amount of any expenses incurred by such individual in the last three months of the preceding calendar year and applied toward such individual's deductible under this section for such preceding year,

SEC. 1837.

(e) There shall be a general enrollment period which is any period after the period described in subsection (d).

SEC. 1861.

(v)(1)

(G)

(iv) For the purpose of determining the occupancy rate with respect to hospitals under clause (i)—

(I) public hospitals under common ownership may elect (with the approval of the Secretary) to be treated as a single hospital, and

(II) beginning two years after the date this subparagraph is first applied with respect to a hospital, the Secretary, to the extent feasible, shall not treat as an inpatient an individual with respect to whom payment is made to the hospital only because of this subparagraph or section 1902(h).

#### Alcohol Detoxification Facility Services

(bb)(1) The term "alcohol detoxification facility services" means services provided by a detoxification facility in order to reduce or eliminate the amount of alcohol in the body, but only to the extent that such services would be covered under subsection (b) if furnished as inpatient services by a hospital, or are physicians' services covered under subsection (s).

<sup>21</sup>P.L. 97-35, §2193(a)(4)(B), struck out "\$30,000,000" and substituted "\$24,070,000", effective for fiscal year 1982.

(2) The term "detoxification facility" means a public or voluntary community-based nonprofit facility, other than a hospital, which—

(A) is engaged in furnishing to inpatients the services described in paragraph (1);

(B) is accredited by the Joint Commission on the Accreditation of Hospitals as meeting the Accreditation Program for Psychiatric Facilities standards (1979 edition), or is found by the Secretary to meet such standards;

(C) has arrangements with one or more hospitals, having agreements in effect under section 1866, for the referral and admission of patients requiring services not available at the facility; and

(D) meets such other requirements as the Secretary may find necessary in the interest of the health and safety of individuals who are furnished services by the facility.

SEC. 1902. (a)

(10)

(A) for making medical assistance available to all individuals receiving aid or assistance under any plan of the State approved under title I, X, XIV, or XVI, or part A of title IV, or with respect to whom supplemental security income benefits are being paid under title XVI;

(C) if medical assistance is included for any group of individuals who are not described in clause (A) and who do not meet the income and resources requirements of the appropriate State plan, or the supplemental security income program under title XVI, as the case may be, as determined in accordance with standards prescribed by the Secretary—

(i) for making medical assistance available to all individuals who would, except for income and resources, be eligible for aid or assistance under any such State plan or to have paid with respect to them supplemental security income benefits under title XVI, and who have insufficient (as determined in accordance with comparable standards) income and resources to meet the costs of necessary medical and remedial care and services, and

(ii) that the medical assistance made available to all individuals not described in clause (A) shall be equal in amount, duration, and scope;

(13)

(A)(i) for the inclusion of some institutional and some non-institutional care and services, and

(ii) for the inclusion of home health services for any individual who, under the State plan, is entitled to skilled nursing facility services, and

(B) in the case of individuals receiving aid or assistance under any plan of the State approved under title I, X, XIV, or XVI, or part A of title IV, or with respect to whom supplemental security income benefits are being paid under title XVI, for the inclusion of at least the care and services listed in paragraphs (1) through (5) and (17) of section 1905(a), and

(C) in the case of individuals not included under subparagraph (B) for the inclusion of at least—

(i) the care and services listed in paragraphs (1) through (5) and (17) of section 1905(a) or

(ii) (I) the care and services listed in any 7 of the paragraphs numbered (1) through (17) of such section and (II) in the event the care and services provided under the State plan include hospital or skilled nursing facility services, physicians' services to an individual in a hospital or skilled nursing facility during any period he is receiving hospital services from such hospital or skilled nursing facility services from such home, and

(D)(i) for payment (except where the State agency is subject to an order under section 1914) of the reasonable cost of inpatient hospital services provided under the plan, as determined in accordance with methods and standards, consistent with section 1122, which shall be developed by the State and reviewed and approved by the Secretary and (after notice of approval by the Secretary) included in the plan, except that the reasonable cost of any such services as determined under such methods and standards shall not exceed the amount which would be determined under section 1861(v) as the reasonable cost of such services for purposes of title XVIII, except that in the case of hospitals reimbursed for services under part A of title XVIII in accordance with section 1814(b)(3), the plan must provide for payment of inpatient hospital services provided in such hospitals under the plan in



accordance with the reimbursement system used under such section, and  
 (ii)<sup>22</sup> for payment of the reasonable cost of inappropriate inpatient services (described in subsection (h)(1)) for which payment is provided only because of subsection (h) at the rate of payment for such services provided for under such subsection, and

(20)

(D) provide methods of determining the reasonable cost of institutional care for such patients;

(b)

(2) effective July 1, 1967, any age requirement which excludes any individual who has not attained the age of 21 and is or would, except for the provisions of section 406(a)(2), be a dependent child under part A of title IV; or

(h)(1) In any case in which a hospital provides inpatient services to an individual that would constitute skilled nursing facility services if provided by a skilled nursing facility or that would constitute intermediate care facility services if provided by an intermediate care facility and a Professional Standards Review Organization (or, in the absence of such a qualified organization, an organization or agency with review responsibility as is otherwise provided for under part A of title XI) determines that inpatient hospital services for the individual are not medically necessary but skilled nursing facility services or intermediate care facility services, respectively, for the individual are medically necessary and such type of facility services are not otherwise available to the individual (as determined in accordance with criteria established by the Secretary) at the time of such determination, payment for inpatient hospital services shall continue to be made under the State plan approved under this title at the payment rate described in paragraph (2) for such type of services during the period in which—

(A) such skilled nursing facility services or intermediate care facility services (as the case may be) for the individual are medically necessary and not otherwise available to the individual (as so determined),

(B) inpatient hospital services for the individual are not medically necessary, and

(C) the individual is entitled to receive medical assistance with respect to such facility services under the State plan, except that if the Secretary determines that the hospital had (during the immediately preceding calendar year) an average daily occupancy rate of 80 percent or more, such payment shall be made (during such period) on the same basis as otherwise used under the State's plan for payments for providing inpatient hospital services.

(2)(A) Except as provided in subparagraph (B), the payment rate referred to in paragraph (1), in the case of skilled nursing facility services or intermediate care facility services, is the estimated adjusted State-wide average rate per patient-day paid for such respective type of services provided under the State plan.

(B) If a hospital has a unit which is a skilled nursing facility or intermediate care facility, the payment rate referred to in paragraph (1), in the case of inpatient services which constitute skilled nursing facility services or intermediate care facility services, is a rate equal to the lesser of the rate described in subparagraph (A) or the allowable costs in effect under the State plan for such type of inpatient services provided to patients of such unit.

(3) Any day on which an individual receives inpatient services for which payment is made under this subsection shall, for purposes of this Act (other than this subsection), be deemed to be a day on which the individual received inpatient hospital services.

(4) For the purpose of determining the occupancy rate with respect to hospitals under paragraph (2)—

(A) public hospitals under common ownership may elect (with the approval of the Secretary) to be treated as a single hospital, and

(B) beginning two years after the date this subsection is first applied with respect to a hospital, the Secretary, to the extent feasible, shall not treat as an inpatient an individual with respect to whom payment is made to the hospital only because of this subsection or section 1861(v)(1)(G).

<sup>22</sup>Alignment as in public law.



## SEC. 1903.

(i)

(1) with respect to any amount paid for items or services furnished under the plan after December 31, 1972, to the extent that such amount exceeds the charge which would be determined to be reasonable for such items or services under the fourth and fifth sentences of section 1842(b)(3); or

(m)(1)(A)

(i) provides to its enrollees who are eligible for benefits under this title the services and benefits described in paragraphs (1), (2), (3), (4)(C), and (5) of section 1905, and, to the extent required by section 1902(a)(13)(A)(ii) to be provided under a State plan for medical assistance, the services and benefits described in paragraph (7) of section 1905(a);

(ii) provides such services and benefits in the manner prescribed in section 1301(b) of the Public Health Service Act (except that, solely for purposes of this paragraph, the term "basic health services" and references thereto, when employed in such section, shall be deemed to refer to the services and benefits described in paragraphs (1), (2), (3), (4)(C), and (5) of section 1905(a), and, to the extent required by section 1902(a)(13)(A)(ii) to be provided under a State plan for medical assistance, the services and benefits described in paragraph (7) of section 1905 (a)); and

(iii) is organized and operated in the manner prescribed by section 1301(c) of the Public Health Service Act (except that solely for purposes of this paragraph, the term "basic health services" and references thereto, when employed in such section shall be deemed to refer to the services and benefits described in section 1905(a)(1), (2), (3), (4)(C), and (5), and to the extent required by section 1902(a)(13)(A)(ii) to be provided under a State plan for medical assistance, the services and benefits described in paragraph (7) of section 1905(a)).

(s)(1)(A) Notwithstanding any other provision of this section (except as otherwise provided in this subsection), the amount of payments which a State is otherwise entitled to receive under this title for any quarter in—

(i) fiscal year 1982, shall be reduced by 3 percent,

(ii) fiscal year 1983, shall be reduced by 4 percent, and

(iii) fiscal year 1984, shall be reduced by 4.5 percent,

of the amount to which the State is otherwise entitled (without regard to payments under subsections (a)(6) and (t), without regard to payments for claims relating to expenditures made for medical assistance for services received through a facility of the Indian Health Service, and without regard to payments for claims relating to expenditures made before fiscal year 1982).

(B) No reduction may be made under subparagraph (A) for a quarter unless, as of the first day of the quarter, the Secretary has promulgated and has in effect final regulations (on an interim or other basis) implementing paragraphs (10)(C) and (13)(A) of section 1902(a) (as amended by the Medicare and Medicaid Amendments of 1981).

(C) For purposes of this paragraph, the term "State" only includes the fifty States and the District of Columbia and does not include any State which did not have a program in operation under a plan approved under this title as of July 1, 1981.

(2) The percentage reduction imposed by paragraph (1) for a State for a quarter shall be reduced—

(A) by one percentage point if the State has a qualified hospital cost review program (described in paragraph (3)) for the quarter,

(B) by one percentage point if the State has a high unemployment rate (as determined under paragraph (4)) for the quarter, and

(C) by one percentage point if the total amount of the State's third party and fraud and abuse recoveries (as defined in paragraph (5)(A)) for the previous quarter is equal to or exceeds one percent of the amount of Federal payments that the Secretary estimates are due the State under this title for that previous quarter (without regard to payments under subsection (b)).

(3) For purposes of paragraph (2)(A), a State has a qualified hospital cost review program for a calendar quarter if such program meets the following requirements:

(A) The program must have been established by statute and in effect on July 1, 1981, and at the beginning of the quarter.

(B) The program must be operated directly by the State and must apply (i) to substantially all non-Federal<sup>28</sup> acute care hospitals (as defined by the Secretary) in the State and (ii) to review of either all revenues or expenses for inpatient hospital services (other than revenues under title XVIII of this Act, unless approved by the Secretary) or at least 75 percent of all revenues or expenses for inpatient hospital services (including revenues under title XVIII of this Act).

<sup>28</sup>P.L. 98-369, §2373(b)(14), struck out "nonfederal" and substituted "non-Federal", effective July 18, 1984.

(C) The State must provide the Secretary with satisfactory assurances as to the equitable treatment under the program of all entities (including Federal and State programs) that pay hospitals for inpatient hospital services, of hospital employees, and of hospital patients.

(D) The Secretary must determine that the annual rate of increase in aggregate hospital inpatient costs per capita or per admission (as defined by the Secretary) in the State during the most recent year (which shall consist of a 12-month period determined by the Secretary for this purpose) ending at least nine months before such quarter (or, at the State's option, during the 2- or 3-year period ending with that year) is at least two percentage points less than the annual rate of increase during that year (or that period, as the case may be) in such costs per capita or per admission for hospitals located in the United States (excluding from such computation, with respect to any year in any period, any State which had in existence a qualified hospital cost review program (or, in the case of periods before January 1, 1982, had a hospital cost review program which the Secretary determines met for such periods the provisions of subparagraphs (A), (B), and (C) of this paragraph) during that entire year).

(4)(A) For purposes of paragraph (2)(B), a State has a high unemployment rate with respect to a quarter if the average of the monthly unemployment rates (as determined by the Bureau of Labor Statistics) for the State for the three months immediately before such quarter is equal to or greater than 150 percent of the average of such rates for the United States for such months.

(B) For purposes of subparagraph (A) and paragraph (3)(D), the term "United States" only includes the fifty States and the District of Columbia.

(5)(A) For purposes of paragraph (2)(C), the term "third party and fraud and abuse recoveries" means, for a State for a previous quarter—

(i) the total amount that State demonstrates to the Secretary that it has recovered or diverted (including amounts saved, to the extent such amounts can be documented to the satisfaction of the Secretary, by reason of the suspension or termination of a provider or other person for fraud or abuse, but only during the period of such suspension or termination or, if shorter, the 1-year period beginning on the date of such termination or suspension) in the quarter on the basis of (I) third-party payments (described in section 1902(a)(25)), (II) the operation of its State medicaid fraud control unit (defined in subsection (q)), and (III) other fraud or abuse control activities, plus

(ii) any amount carried forward from the previous quarter under subparagraph (B).

Subclause (I) of clause (i) shall only apply to quarters during fiscal year 1982.

(B) If the total amount of the State's third party and fraud and abuse recoveries (defined in subparagraph (A)) for a quarter (beginning on or after October 1, 1981) exceeds one percent of the amount of Federal payments that the Secretary estimates are due the State under this title for that quarter (without regard to subsection (b)), the amount of such excess shall be carried forward to the following quarter or quarters for purposes of clause (ii) of subparagraph (A).<sup>24</sup>

(t)(1) The Secretary shall determine for each State (as defined in subsection (s)(1)(C)) for each of fiscal years 1982, 1983, and 1984, a target amount of Federal medicaid expenditures. Such target amount for a State for fiscal year—

(A) 1982, is equal to 109 percent of the estimate (based upon the last such estimate for such State received by the Secretary before April 1, 1981) of the Federal share of expenditures under this title (other than payments under subsection (a)(6), interest paid under subsection (d)(5), and payments for claims relating to expenditures made for medical assistance for services received through a facility of the Indian Health Service, without taking into account reductions in payment under subsection (s) or additional payments under this subsection, and without regard to payments for claims relating to expenditures made prior to October 1, 1980) in fiscal year 1981 for such State;

(B) 1983, is equal to the target amount determined under subparagraph (A) for the State increased or decreased by a percentage equal to the percentage increase or decrease (as the case may be) in the index of the medical care expenditure category of the Consumer Price Index for all urban consumers (U.S. city average) published by the Bureau of Labor Statistics for the 12-month period ending on September 30, 1983; and

(C) 1984, is equal to the target amount determined under subparagraph (A) for the State increased or decreased by a percentage equal to the percentage increase or decrease (as the case may be) in the index of the medical care expenditure

<sup>24</sup>P.L. 97-35, §2161(c)(1), [as amended by P.L. 97-248, §137(a)(2)], repealed subsection (s), effective for calendar quarters beginning on or after October 1, 1984.



category of the Consumer Price Index for all urban consumers (U.S. city average) published by the Bureau of Labor Statistics for the 24-month period ending on September 30, 1984.

(2) Notwithstanding any other provision of this section (except as otherwise provided in this subsection), the amount of payments which a State (with a State plan approved under this title) is otherwise entitled to receive for the first quarter of any fiscal year (beginning with fiscal year 1983 and ending with fiscal year 1985) shall be supplemented by an amount equal to the lesser of—

(A) the amount by which the Secretary determines or estimates (subject to appropriate subsequent adjustments) the Federal share of expenditures under this title (other than payments under subsection (a)(6), interest paid under subsection (d)(5), and payments for claims relating to expenditures made for medical assistance for services received through a facility of the Indian Health Service, without taking into account reductions in payment under subsection (s) or payments under this subsection, without regard to payments for claims relating to expenditures made prior to October 1, 1980, and subject to paragraph (3) of this subsection) under the State's plan for the previous fiscal year was less than the target amount of Federal medicaid expenditures for that State for that fiscal year determined under paragraph (1), or

(B) the amount of the reductions imposed with respect to the State under subsection (s) for the quarters in the previous fiscal year.

(3) Only for the purposes of computing under this subsection the Federal share of expenditures for a State for fiscal years 1982, 1983, and 1984 (in the case of the payment which may be made for the first quarter of fiscal years 1983, 1984, and 1985, respectively), the Federal medical assistance percentage for fiscal years 1982, 1983, and 1984 shall be the lower of the Federal medical assistance percentage for the State in effect for fiscal year 1981, or the Federal medical assistance percentage for the State in effect for fiscal year 1982.<sup>25</sup>

#### SEC. 1905.

(a)

(i) under the age of 21,

## TITLE XX—GRANTS TO STATES FOR SERVICES

### APPROPRIATION AUTHORIZED

SEC. 2001. For the purpose of encouraging each State, as far practicable under the conditions in that State, to furnish services directed at the goal of—

(1) achieving or maintaining economic self-support to prevent, reduce, or eliminate dependency,

(2) achieving or maintaining self-sufficiency, including reduction or prevention of dependency,

(3) preventing or remedying neglect, abuse, or exploitation of children and adults unable to protect their own interests, or preserving, rehabilitating, or reuniting families,

(4) preventing or reducing inappropriate institutional care by providing for community-based care, home-based care, or other forms of less intensive care, or

(5) securing referral or admission for institutional care when other forms of care are not appropriate, or providing services to individuals in institutions,

there is authorized to be appropriated for each fiscal year a sum sufficient to carry out the purposes of this title. The sums made available under this section shall be used for making payments to States under section 2002 (and to territorial jurisdictions as described in subsection (a)(2)(C) thereof).

### PAYMENTS TO STATES

SEC. 2002. (a)(1) From the sums appropriated therefor, the Secretary shall, subject to the provisions of this section and section 2003, pay to each State, for each quarter, an amount equal to 100 per centum of the expenditures during that quarter for child day care services (including expenditures for grants to qualified providers under section 2007) to the extent permitted by paragraph (17), 90 per centum of the total expenditures during that quarter for the provision of family planning services and 75 per centum of the total expenditures during that quarter for the provision of other services directed at the goal of—

(A) achieving or maintaining economic self-support to prevent, reduce, or eliminate dependency,

<sup>25</sup>P.L. 97-35, §2161(c)(2), [as amended by P.L. 92-248, §137(a)(2)], repealed subsection (t), effective after payments for the first quarter of fiscal year 1985.



(B) achieving or maintaining self-sufficiency, including reduction or prevention of dependency,

(C) preventing or remedying neglect, abuse, or exploitation of children and adults unable to protect their own interests, or preserving, rehabilitating, or reuniting families,

(D) preventing or reducing inappropriate institutional care by providing for community-based care, home-based care, or other forms of less intensive care, or

(E) securing referral or admission for institutional care when other forms of care are not appropriate, or providing services to individuals in institutions, including expenditures for administration (including planning and evaluation) and personnel training and retraining directly related to the provision of those services (including both short- and long-term training at educational institutions through grants to such institutions or by direct financial assistance to students enrolled in such institutions). Services that are directed at these goals include, but are not limited to, child care services, protective services for children and adults, services for children and adults in foster care, services related to the management and maintenance of the home, day care services for adults, transportation services, training and related services, employment services, information, referral, and counseling services, the preparation and delivery of meals, health support services and appropriate combinations of services designed to meet the special needs of children, the aged, the mentally retarded, the blind, the emotionally disturbed, the physically handicapped, and alcoholics and drug addicts.

(2)(A)(i) Except as provided in clause (iii), no payment may be made under this section to any State for any fiscal year in excess of an amount which bears the same ratio to the amount specified in clause (ii) as the population of that State bears to the population of the fifty States and the District of Columbia. The Secretary shall promulgate the limitation applicable to each State for each fiscal year under this paragraph prior to the first day of the third month of the preceding fiscal year, as determined on the basis of the most recent satisfactory data available from the Department of Commerce.

(ii) The amount specified for purposes of clause (i) for fiscal year 1980 and each succeeding fiscal year shall be an amount (not exceeding \$3,300,000,000) equal to the indexed ceiling amount for that fiscal year as determined under subparagraph (B).

(iii) Payment with respect to expenditures for personnel training or retraining directly related to the provision of services under this title shall be made to a State in excess of the limitation for such State promulgated under clause (i) for any fiscal year and without regard to such limitation; except that—

(I) notwithstanding any other provision of law, payment to a State with respect to such expenditures for fiscal years 1980 and 1981 may not exceed an amount equal to 4 per centum of such State's limitation (for the fiscal year involved) under clause (i), or if, greater, an amount equal to the amount of the payment made under this title to such State with respect to such expenditures for fiscal year 1979, or equal to (a) the amount which would be payable without regard to this subclause with respect to expenditures pursuant to an appropriation made prior to October 1, 1979, by such State for fiscal year 1980, or, if less, (b) the amount determined under division (a) of this subclause reduced to the extent necessary and on a proportional basis so as to assure that the aggregate of the additional amounts payable to all States as a result of such division (a) does not exceed \$6,000,000; and

(II) payment to a State with respect to such expenditures for fiscal year 1982 or any succeeding fiscal year may be made only if the State has submitted to the Secretary in accordance with paragraph (18) (prior to the beginning of the fiscal year involved) a training plan specifying how its funds expended for such training or retraining in that fiscal year will be used, and only with respect to expenditures included in such plan which are approved by the Secretary in accordance with criteria prescribed by him.

(B)(i)(I) Except as otherwise provided in clauses (ii), (iii), and (iv), the indexed ceiling amount for any fiscal year shall be an amount equal to the indexed ceiling amount for the preceding fiscal year increased or decreased (as the case may be) by an amount determined under division (II).

(II) For purposes of division (I) the amount of the increase or decrease (as the case may be) shall be an amount equal to \$2,500,000,000, multiplied by a percentage equal to the positive or negative percentage change in the Consumer Price Index prepared by the Department of Labor, and used in determining cost-of-living adjustments under section 215(i) of this Act, for the second quarter of the preceding fiscal year as compared to such index for the second quarter of the second preceding fiscal year (rounded to the nearest one-tenth of 1 per centum). For purposes of this clause the Consumer Price Index for any quarter shall be the arithmetical mean of such index for the three months in such quarter.

(ii) If the percentage increase in the Consumer Price Index as determined under clause (i)(II) for any fiscal year exceeds the inflation rate for that fiscal year as shown for that year (or, if no rate is shown for that year, for the most recent preceding year for which a rate is shown) in the table which appears on page 25 of Senate Budget Committee Report Numbered 96-311, then for such fiscal year such inflation rate shall be used in making the determination under clause (i)(II) instead of the percentage increase in the Consumer Price Index.

(iii) The indexed ceiling amount determined under clause (i) shall, if not a multiple of \$100,000,000, be rounded to the next lesser amount that is a multiple of \$100,000,000.

(iv) The indexed ceiling amount for fiscal year 1979 shall be \$2,500,000,000.

(C) From the amounts made available under section 2001 for any fiscal year beginning with fiscal year 1980 (in addition to any sums appropriated for purposes of payments under the preceding provisions of this subsection), the Secretary shall allocate—

(i) to the jurisdictions of Puerto Rico, Guam, and the Virgin Islands, for purposes of payments under sections 3(a)(4) and (5), 403(a)(3), 1003(a)(3) and (4), 1403(a)(3) and (4), and 1603(a)(4) and (5), with respect to services, the sums of \$15,000,000, \$500,000 and \$500,000, respectively, and

(ii) to the jurisdiction of the Northern Mariana Islands, for purposes of payments under section 403(a)(3), with respect to services and for services programs for other individuals as defined by the Secretary, the sum of \$100,000, in addition to any amounts otherwise available to such jurisdictions under this Act.

(3) No payment may be made under this section to any State with respect to any expenditure for the provision of any service to any individual unless—

(A) the State's services program planning meets the requirements of section 2004, and

(B) the final comprehensive services plan in effect when the service is provided to the individual includes the provision of that service to a category of individuals which includes that individual in the descriptions required by section 2004(2) (B) and (C) of the services to be provided under the plan and the categories of individuals to whom the services are to be provided.

The Secretary may not deny payment under this section to any State with respect to any expenditure on the ground that it is not an expenditure for the provision of a service or is not an expenditure for the provision of a service directed at a goal described in paragraph (1) of this subsection.

(4) So much of the aggregate expenditures with respect to which payment is made under this section to any State for any fiscal year as equals 50 per centum of the payment made under this section to the State for that fiscal year must be expended for the provision of services to individuals—

(A) who are receiving aid under the plan of the State approved under part A of title IV or who are eligible to receive such aid, or

(B) whose needs are taken into account in determining the needs of an individual who is receiving aid under the plan of the State approved under part A of title IV, or who are eligible to have their needs taken into account in determining the needs of an individual who is receiving or is eligible to receive such aid, or

(C) with respect to whom supplemental security income benefits under title XVI or State supplementary payments, as defined in section 2008(1), are being paid, or who are eligible to have such benefits or payments paid with respect to them, or

(D) whose income and resources are taken into account in determining the amount of supplemental security income benefits or State supplementary payments, as defined in section 2008(1), being paid with respect to an individual, or whose income and resources would be taken into account in determining the amount of such benefits or payments to be paid with respect to an individual who is eligible to have such benefits or payments paid with respect to him, or

(E) who are eligible for medical assistance under the plan of the State approved under title XIX.

In any case in which services are provided to individuals to whom the provisions of paragraph (14) are applied, the proportion of the expenditures for such services which are attributable to individuals described in the preceding sentence may be determined on the basis of generally accepted statistical sampling procedures.

(5) No payment may be made under this section to any State with respect to any expenditure for the provision of any service to any individual—

(A) who is receiving, or whose needs are taken into account in determining the needs of an individual who is receiving, aid under the plan of the State approved under part A of title IV, or with respect to whom supplemental security income benefits under title XVI or State supplementary payments, as defined in section 2008(1), are being paid, or



(B) who is a member of a family the monthly gross income of which is less than the lower of—

(i) 80 per centum of the median income of a family of four in the State, or

(ii) the median income of a family of four in the fifty States and the District of Columbia,

adjusted, in accordance with regulations prescribed by the Secretary, to take into account the size of the family,

if any fee or other charge (other than a voluntary contribution) imposed on the individual for the provision of that service is not consistent with such requirements (including requirements prohibiting the imposition of any such fee or charge) as the Secretary shall prescribe.

(6) No payment may be made under this section to any State with respect to any expenditure for the provision of any service, other than an information or referral service, family planning services, or a service directed at the goal of preventing or remedying neglect, abuse, or exploitation of children and adults unable to protect their own interests, to any individual who is not an individual described in paragraph (5), and—

(A) who is a member of a family the monthly gross income of which exceeds 115 per centum of the median income of a family of four in the State, adjusted, in accordance with regulations prescribed by the Secretary, to take into account the size of the family, or

(B) who is a member of a family the monthly gross income of which—

(i) exceeds the lower of—

(I) 80 per centum of the median income of a family of four in the State, or

(II) the median income of a family of four in the fifty States and the District of Columbia,

adjusted, in accordance with regulations prescribed by the Secretary, to take into account the size of the family, and

(ii) does not exceed 115 per centum of the median income of a family of four in the State, adjusted, in accordance with regulations prescribed by the Secretary, to take into account the size of the family,

unless a fee or other charge reasonably related to income is imposed on the individual for the provision of the service.

The Secretary shall promulgate the median income of a family of four in each State and the fifty States and the District of Columbia applicable to payments with respect to expenditures in each fiscal year prior to the first day of the third month of the preceding fiscal year.

(7) No payment may be made under this section to any State with respect to any expenditure—

(A) for the provision of medical or any other remedial care (except as provided in paragraph (11)(D)), other than family planning services, unless it is an integral but subordinate part of a service described in paragraph (1) of this subsection and Federal financial participation with respect to the expenditure is not available under the plan of the State approved under title XIX; or

(B) for the purchase, construction, or major modification of any land, building or other facility, or fixed equipment; or

(C) which is in the form of goods or services provided in kind by a private entity;

or

(D) which is made from donated private funds, unless such funds—

(i) are transferred to the State and are under its administrative control, and

(ii) are donated to the State without restrictions as to use, other than restrictions as to the services with respect to which the funds are to be used imposed by a donor who is not a sponsor or operator of a program to provide those services, or the geographic area in which the services with respect to which the contribution is used are to be provided, except that during fiscal years 1980 and 1981 the provisions of this clause shall not apply with respect to funds that are donated for the purpose of training or retraining as provided in subsection (a)(1), if such training or retraining is carried out by a public or nonprofit entity, and

(iii) do not revert to the donor's facility or use if the donor is other than a nonprofit organization; or

(E) for the provision of room or board (except as provided by paragraph (11)(C) and paragraph (11)(D)) other than room or board provided for a period of not more than six consecutive months as an integral but subordinate part of a service described in paragraph (1) of this subsection.

With regard to ending the dependency of individuals who are alcoholics or drug addicts, the entire rehabilitative process for such individuals, including but not limited



to initial detoxification, short term residential treatment, and subsequent outpatient counseling and rehabilitative services, whether or not such a process involves more than one provider of services, shall be the basis for determining whether standards imposed by or under subparagraph (A) or (E) of this paragraph have been met.

(8) No payment may be made under this section with respect to any expenditure if payment is made with respect to that expenditure under section 403 or 423 of this Act.

(9)(A) No payment may be made under this section with respect to any expenditure in connection with the provision of any child day care service, unless—

(i) in the case of care provided in the child's home, the care meets standards established by the State which are reasonably in accord with recommended standards of national standard-setting organizations concerned with the home care of children, or

(ii) in the case of care provided outside the child's home, the care meets the Federal interagency day care requirements as approved by the Department of Health, Education, and Welfare and the Office of Economic Opportunity on September 23, 1968; except that (I) subdivision III of such requirements with respect to educational services shall be recommended to the States and not required, and staffing standards for school-age children in day care centers may be revised by the Secretary, (II) the staffing standards imposed with respect to such care in the case of children under age 3 shall conform to regulations prescribed by the Secretary, (III) the staffing standards imposed with respect to such care in the case of children aged 10 to 14 shall require at least one adult for each 20 children, and in the case of school-aged children under age 10 shall require at least one adult for each 15 children, (IV) the State agency may waive the staffing standards otherwise applicable in the case of a day care center or group day care home in which not more than 20 per centum of the children in the facility (or, in the case of a day care center, not more than 5 children in the center) are children whose care is being paid for (wholly or in part) from funds made available to the State under this title, if such agency finds that it is not feasible to furnish day care for the children, whose care is so paid for, in a day care facility which complies with such staffing standards, and if the day care facility providing care for such children complies with applicable State standards, and (V) in determining whether applicable staffing standards are met in the case of day care provided in a family day care home, the number of children being cared for in such home shall include a child of the mother who is operating the home only if such child is under age 6,

except as provided in subparagraph (B).

(B) The Secretary shall submit to the President of the Senate and the Speaker of the House of Representatives, after December 31, 1976, and prior to April 1, 1978, an evaluation of the appropriateness of the requirements imposed by subparagraph (A), together with any recommendations he may have for modification of those requirements. No earlier than ninety days after the submission of that report, the Secretary may, by regulation, make such modifications in the requirements imposed by subparagraph (A) as he determines are appropriate.

(C) The requirements imposed by this paragraph are in lieu of any requirements that would otherwise be applicable under section 522(d) of the Economic Opportunity Act of 1964 to child day care services with respect to which payment is made under this section.

(D) The requirements imposed by this paragraph or by any regulations promulgated by the Department of Health and Human Services to carry out this paragraph shall be inapplicable to child day care services provided after June 30, 1980, and prior to July 1, 1981, which meet applicable standards of State and local law.

(10) No payment may be made under this section with respect to any expenditure for the provision of any educational service which the State makes generally available to its residents without cost and without regard to their income.

(11) No payment may be made under this section with respect to any expenditure for the provision of any service to any individual living in any hospital, skilled nursing facility, or intermediate care facility (including any such hospital or facility for mental diseases or for the mentally retarded), any prison, or any foster family home except—

(A) any expenditure for the provision of a service that (i) is provided by other than the hospital, facility, prison, or foster family home in which the individual is living, and (ii) is provided, under the State's program for the provision of the services described in paragraph (1), to individuals who are not living in a hospital, skilled nursing facility, intermediate care facility, prison, or foster family home,

(B) any expenditure which is for the cost, in addition to the cost of basic foster care, of the provision, by a foster family home, to an individual living in that home, of a service which meets a special need of that individual, as determined under regulations prescribed by the Secretary,

(C) any expenditure for the provision of emergency shelter provided to a child, for not in excess of thirty days, as a protective service;

(D) any expenditure for the initial detoxification of an alcoholic or drug dependent individual, for a period not to exceed 7 days, if such detoxification is integral to the further provision of services for which such individual would otherwise be eligible under this title;<sup>26</sup> and

(E) any expenditure for the provision of emergency shelter, for not in excess of thirty days in any six-month period, provided as a protective service to an adult in danger of physical or mental injury, neglect, maltreatment, or exploitation.

(12) No payment may be made under this section with respect to any expenditure for the provision of cash payments as a service.

(13) No payment may be made under this section with respect to any expenditure for the provision of any service to any individual to the extent that the provider of the service or the individual receiving the service is eligible to receive payment under title XVIII with respect to the provision of the service.

(14)(A) For purposes of paragraphs (5) and (6), an individual shall, at the option of the State, be deemed to be an individual described in paragraph (5)(B) if, because of the geographic area in which any particular service is provided to him, the characteristics of the community to which it is provided, the nature of the service, the conditions (other than income) of eligibility to receive it, or other factors surrounding its provision, the State may reasonably conclude, without individual determinations of eligibility, that substantially all of the persons who receive the service are members of families with a monthly gross income which is not more than 90 per centum of the median income of a family of four in the State, adjusted (in accordance with regulations prescribed by the Secretary) to take into account the size of the family.

(B) The provisions of subparagraph (A) shall not be applicable to child day care services furnished to any child other than a child of a migratory agricultural worker.

(15) No payment may be made under this section with respect to any expenditure for the provision of any health related service if such service is provided by an entity which has failed to comply with a request made by the Secretary or State agency under section 2003(d)(1)(J), for so long as such entity remains in noncompliance with such request.

(16) Any State may refuse to enter into a contract or other arrangement with a provider of services for purposes of participation under the program established by this title, or otherwise to approve a provider for such purposes, if any person who has a direct or indirect ownership or control interest of 5 percent or more in such provider, or who is an officer, director, agent, or managing employee (as defined in section 1126(b)) of such provider, is a person described in section 1126(a), and the State may terminate any such contract, arrangement, or approval if it determines that the provider did not fully and accurately make any disclosure required of it by section 1126(a) at the time the contract or arrangement was entered into or the approval was given.

(17)(A) The total payment to a State under this section with respect to expenditures during any fiscal year for the provision of child day care services under this title (including expenditures for grants to qualified providers under section 2007) shall be equal to 100 per centum of such expenditures to the extent that such expenditures (during that fiscal year) do not exceed—

(i) an amount which bears the same ratio to \$200,000,000 as the amount of the State's limitation under paragraph (2)(A) bears to the indexed ceiling amount for such fiscal year, in the case of fiscal year 1980 and fiscal year 1981; or

(ii) 8 per centum of the State's limitation under paragraph (2)(A) for such fiscal year, in the case of fiscal year 1982 and any subsequent fiscal year.

(B) Federal funds payable to a State under this title (with respect to expenditures for child day care services) at the rate specified in subparagraph (A) shall, to the maximum extent that the State determines to be feasible, be employed in such a way as to increase the employment of welfare recipients and other low-income persons in jobs related to the provision of child day care services.

(18) Effective October 1, 1981, no payment may be made under this section for training or retraining expenditures except in accordance with a training plan approved by the Secretary which, at a minimum—

(A) describes how training needs were assessed and how the assessment was used to structure the training programs, the individuals to be trained, and the training resources to be used;

(B) demonstrates that the training activities have a direct relationship to the title XX services program and to the State's staffing needs to carry out the title XX services program; and

<sup>26</sup>Punctuation for subparagraphs (A) through (D) as in public laws.



(C) describes the State agency's plan to monitor training programs and to evaluate the agency's overall staff training and development program.

(b)(1) Prior to the beginning of each quarter the Secretary shall estimate the amount to which a State will be entitled under this section for that quarter on the basis of a report filed by the State containing its estimate of the amount to be expended during that quarter with respect to which payment must be made under this section, together with an explanation of the bases for that estimate.

(2) The Secretary shall then pay to the State, in such installments as he may determine, the amount so estimated, reduced or increased to the extent of any overpayment or underpayment which the Secretary determines was made under this section to the state for any prior quarter and with respect to which adjustment has not already been made under this subsection.

(3) Upon the making of any estimate by the Secretary under this subsection any appropriations available for payments under this section shall be deemed obligated.

#### PROGRAM REPORTING

SEC. 2003. (a) Each State which participates in the program established by this title shall make such reports concerning its use of Federal social services funds as the Secretary may by regulation provide.

(b) Each State which participates in the program established by this title shall assure that the aggregate expenditures from appropriated funds from the State and political subdivisions thereof for the provision of services during each fiscal year (as selected by the State under section 2004(1)) within each services program period (as established under the requirements of section 2002(a)(3)) with respect to which payment is made under section 2002 is not less than the aggregate expenditures from such appropriated funds for the provision of those services during the fiscal year ending June 30, 1973, or the fiscal year ending June 30, 1974, with respect to which payment was made under the plan of the State approved under title I, VI, X, XIV, or XVI, or part A of title IV, whichever is less, except that the requirements of this subsection shall not apply to any State for any services program period if the payment to the State under section 2002, for each fiscal year any part of which is included in that services program year, with respect to expenditures other than expenditures for personnel training or retraining directly related to the provision of services, equals the allotment of the State for that fiscal year under section 2002(a)(2).

(c)(1) If the Secretary, after reasonable notice and an opportunity for a hearing to the State, finds that there is a substantial failure to comply with any of the requirements imposed by subsections (a) and (b) of this section, he shall, except as provided in paragraph (2), notify the State that further payments will not be made to the State under section 2002 until he is satisfied that there will no longer be any such failure to comply, and until he is so satisfied he shall make no further payments to the State.

(2) The Secretary may suspend implementation of any termination of payments under paragraph (1) for such period as he determines appropriate and instead reduce the amount otherwise payable to the State under section 2002 for expenditures during that period by 3 per centum for each of subsections (a) and (b) of this section with respect to which there was a finding of substantial noncompliance and with respect to which he is not yet satisfied that there will no longer be any such failure to comply.

(d)(1) Each State which participates in the program established by this title shall have a plan applicable to its program for the provision of the services described in section 2002(a)(1) which—

(A) provides that an opportunity for a fair hearing before the appropriate State agency will be granted to any individual whose claim for any service described in section 2002(a)(1) is denied or is not acted upon with reasonable promptness;

(B) provides safeguards which restrict the use or disclosure of information obtained in connection with administration of the State's program for the provision of the services described in section 2002(a)(1) concerning applicants for and recipients of those services to purposes directly connected with (A)<sup>27</sup> the administration of that program, the plan of the State approved under part A of title IV, the plan of the State developed under part B of that title, the supplemental security income program established by title XVI, or the plan of the State approved under title XIX, and (B)<sup>28</sup> any audit or similar activity conducted in connection with the administration of any such plan or program by any governmental entity which is authorized by law to conduct such audit or activity; and the safeguards so provided shall prohibit disclosure, to any committee or legislative body (other than an entity referred to in clause (B) with respect to an

<sup>27</sup>As in original. Second (A) should be redesignated.

<sup>28</sup>As in original. Second (B) should be redesignated.



activity referred to in such clause), of any information which identifies by name or address any such applicant or recipient;”<sup>29</sup>

(C) provides for the designation, by the chief executive officer of the State or as otherwise provided by the laws of the State, of an appropriate agency which will administer or supervise the administration of the State's program for the provision of the services described in section 2002(a)(1);

(D) provides that the State will, in the administration of its program for the provision of the services described in section 2002(a)(1), use such methods relating to the establishment and maintenance of personnel standards on a merit basis as are found by the Secretary to be necessary for the proper and efficient operation of the program, except that the Secretary shall exercise no authority with respect to the selection, tenure of office, or compensation of any individual employed in accordance with such methods;

(E) provides that no durational residency or citizenship requirement will be imposed as a condition to participation in the program of the State for the provision of the services described in section 2002(a)(1);

(F) provides, if the State program for the provision of the services described in section 2002(a)(1) includes services to individuals living in institutions or foster homes, for the establishment or designation of a State authority or authorities which shall be responsible for establishing and maintaining standards for such institutions or homes which are reasonably in accord with recommended standards of national organizations concerned with standards for such institutions or homes, including standards related to admissions policies, safety, sanitation, and protection of civil rights;

(G) provides, if the State program for the provision of the services described in section 2002(a)(1) includes child day care services, for the establishment or designation of a State authority or authorities which shall be responsible for establishing and maintaining standards for such services which are reasonably in accord with recommended standards of national organizations concerned with standards for such services, including standards related to admission policies for facilities providing such services, safety, sanitation, and protection of civil rights;

(H) provides that the State's program for the provision of the services described in section 2002(a)(1) will be in effect in all political subdivisions of the State;

(I) provides for financial participation by the State in the provision of the services described in section 2002(a)(1);

(J) provides that any entity (other than an individual practitioner or a group of practitioners) receiving payments for the provision of health related services complies with the requirements of section 1124, and supplies (within such period as may be specified in regulations by the Secretary or by the State agency which administers or supervises the administration of the plan) upon request specifically addressed to such entity by the Secretary or such State agency, respectively, (i) full and complete information as to the ownership of a subcontractor (as defined by the Secretary in regulations) with whom such entity has had, during the previous twelve months, business transactions in an aggregate amount in excess of \$25,000, and (ii) full and complete information as to any significant business transactions (as defined by the Secretary in regulations), occurring during the five-year period ending on the date of such request, between such entity and any wholly owned supplier or between such entity and any subcontractor; and

(K) provides that the State will bar any specified individual from participation in the program for the period specified by the Secretary when required by him to do so pursuant to section 1128, and provides that no payment may be made under the program with respect to any item or service furnished by such individual during such period.

Notwithstanding clause (C), if on December 1, 1974, the State agency which administered or supervised the administration of the portion of the plan of the State for services to the aged, blind, or disabled approved under title VI of this Act which related to blind individuals was different from the agency which administered or supervised the administration of the rest of that plan, the State agency which administered or supervised the administration of the portion of the plan of the State for services to the aged, blind, or disabled related to blind individuals may be designated to administer or supervise the administration of the portion of the State's program for the provision of the services described in section 2002(a)(1) related to blind individuals and a separate State agency may be designated to administer or supervise the administration of the rest of the program; and in such case the part of the program which each agency administers, or the administration of which each agency supervises, shall be regarded as a separate program for the provision of the services described in section 2002(a)(1)

<sup>29</sup>As in original. Second semicolon should be deleted.

for purposes of this title. The date selected by the State pursuant to section 2004(1) as the beginning of the services program period for each of the separate programs shall be the same.

(2) The Secretary shall approve any plan which complies with the provisions of paragraph (1).

(e)(1) No payment may be made under section 2002 to any State which does not have a plan approved under subsection (d).

(2) In the case of any State plan which has been approved by the Secretary under subsection (d), if the Secretary, after reasonable notice and an opportunity for a hearing to the State, finds—

(A) that the plan no longer complies with the provisions of subsection (d)(1), or

(B) that in the administration of the plan there is a substantial failure to comply with any such provision,

the Secretary shall, except as provided in paragraph (3), notify the State that further payments will not be made to the State under section 2002 until he is satisfied that there will no longer be any such failure to comply, and until he is so satisfied he shall make no further payments to the State.

(3) The Secretary may suspend implementation of any termination of payments under paragraph (2) for such period as he determines appropriate and instead reduce the amount otherwise payable to the State under section 2002 for expenditures during that period by 3 percent for each clause of subsection (d)(1) with respect to which there is a finding of noncompliance and with respect to which he is not yet satisfied that there will no longer be any such failure to comply.

(f) The provisions of section 333 of the Comprehensive Alcohol Abuse and Alcoholism Prevention, Treatment, and Rehabilitation Act of 1970 shall be applicable to services provided by any State pursuant to this title with respect to individuals suffering from drug addiction or alcoholism.

#### SERVICES PROGRAM PLANNING

Sec. 2004. A State's services program planning meets the requirements of this section if, for the purpose of assuring public participation in the development of the program for the provision of the services described in section 2002(a)(1) within the State—

(1) for each services program period, the beginning of the fiscal year of the Federal Government, the State government, or the political subdivisions of such State is established as the beginning of the State's services program period, and the end of such fiscal year, the succeeding fiscal year, or the second succeeding fiscal year is established as the end of the State's services program period; and

(2) at least ninety days prior to the beginning of the State's services program period, the chief executive officer of the State, or such other official as the laws of the State provide, publishes and makes generally available (as defined in regulations prescribed by the Secretary after consideration of State laws governing notice of actions by public officials) to the public a proposed comprehensive services program plan prepared by the agency designated pursuant to the requirements of section 2003(d)(1)(C) and, unless the laws of the State provide otherwise, approved by the chief executive officer, which sets forth the State's plan for the provision of the services described in section 2002(a)(1) during that period including—

(A) the objectives to be achieved under the program,

(B) the services to be provided under the program, including at least one service directed at at<sup>30</sup> least one of the goals in each of the five categories of goals set forth in section 2002(a)(1) (as determined by the State) and including at least three types of services (selected by the State) for individuals who are recipients of supplemental security income benefits under title XVI and who are in need of such services, together with a definition of those services and a description of their relationship to the objectives to be achieved under the program and the goals described in section 2002(a)(1),

(C) the categories of individuals to whom those services are to be provided, including any categories based on the income of individuals or their families,

(D) the geographic areas in which those services are to be provided, and the nature and amount of the services to be provided in each area,

(E) a description of the planning, evaluation, and reporting activities to be carried out under the program,

(F) the sources of the resources to be used to carry out the program,

<sup>30</sup>As in original. One "at" should be deleted.



(G) a description of the organizational structure through which the program will be administered, including the extent to which public and private agencies and volunteers will be utilized in the provision of services,

(H) a description of how the provision of services under the program will be coordinated with the plan of the State approved under part A of title IV, the plan of the State developed under part B of that title, the supplemental security income program established by title XVI, the plan of the State approved under title XIX, and other programs for the provision of related human services within the State, including the steps taken to assure maximum feasible utilization of services under these programs to meet the needs of the low income population,

(I) the estimated expenditures under the program, including estimated expenditures with respect to each of the services to be provided, each of the categories of individuals to whom those services are to be provided, and each of the geographic areas in which those services are to be provided, and a comparison between estimated non-Federal expenditures under the program and non-Federal expenditures for the provision of the services described in section 2002(a)(1) in the State during the preceding services program period, and

(J) a description of the steps taken, or to be taken, to assure that the needs of all residents of, and all geographic areas in, the State were taken into account in the development of the plan; and

(3) public comment on the proposed plan is accepted for a period of at least forty-five days; and

(4) at least forty-five days after publication of the proposed plan and prior to the beginning of the State's services program period, the chief executive officer of the State, or such other official as the laws of the State provide, publishes a final comprehensive services program plan prepared by the agency designed pursuant to the requirements of section 2003(d)(1)(C) and, unless the laws of the State provide otherwise, approved by the chief executive officer, which sets forth the same information required to be included in the proposed plan, together with an explanation of the differences between the proposed and final plan and the reasons therefor; and

(5) any amendment to a final comprehensive services program plan is prepared by the agency designated pursuant to section 2003(d)(1)(C), approved by the chief executive officer of the State unless the laws of the State provide otherwise, and published by the chief executive officer of the State, or such other official as the laws of the State provide, as a proposed amendment on which public comment is accepted for a period of at least thirty days, and then prepared by the agency designated pursuant to section 2003(d)(1)(C), approved by the chief executive officer of the State unless the laws of the State provide otherwise, and published by the chief executive officer of the State, or such other official as the laws of the State provide, as a final amendment, together with an explanation of the differences between the proposed and final amendment and the reasons therefor; and

(6) in the case of a State that adopts a services program planning period of longer than one year, the State agency publishes and makes generally available such information concerning the comprehensive services program at such times as the Secretary may by regulation require.

#### EFFECTIVE DATE OF REGULATIONS PUBLISHED BY THE SECRETARY

SEC. 2005. No final regulation published by the Secretary under this title shall be effective with respect to payments under section 2002 for expenditures during any quarter commencing before the beginning of the first services program period established by the State under the requirements of section 2002(a)(3) which begins at least sixty days after the publication of the final regulation.

#### EVALUATION; PROGRAM ASSISTANCE

SEC. 2006. The Secretary shall provide for the continuing evaluation of State programs for the provision of the services described in section 2002(a)(1).

(b) The Secretary shall make available to the States assistance with respect to the content of their services program, and their services program planning, reporting, administration, and evaluation.

(c) Within six months after the close of each fiscal year, the Secretary shall submit to the Congress a report on the operation of the program established by this title during that year, including—



- (1) the evaluations carried out under subsection (a) and the results obtained therefrom, and
- (2) the assistance provided under subsection (b) during that year.

## CHILD DAY CARE SERVICES

SEC. 2007. (a) Subject to subsection (b), sums grants by a State to a qualified provider of child day care services (as defined in subsection (c)) to assist such provider in meeting its work incentive program expenses (as defined in subsection (c)) with respect to individuals employed in jobs related to the provision of child day care services in one or more child day care facilities of such provider, shall be deemed for purposes of section 2002 to constitute expenditures made by the State in accordance with the provisions of this title for the provision of child day care services.

(b) The provisions of subsection (a) shall not be applicable with respect to any grant made to a particular qualified provider of child day care services to the extent that (as determined by the Secretary) such grant is or will be used to pay wages to any employee at an annual rate in excess of \$6,000, in the case of a public or nonprofit private provider, or at an annual rate in excess of \$5,000, or to pay more than 80 per centum of the wages of any employee, in the case of any other provider.

(c) For purposes of this subsection—

(1) the term “qualified provider of child day care services”, when used in reference to a recipient of a grant by a State, includes a provider of such services only if, of the total number of children receiving such services from such provider in the facility with respect to which the grant is made, at least 20 per centum thereof have some or all of the costs for the child day care services so furnished to them by such provider paid for under the State’s services program conducted pursuant to this title; and

(2) the term “work incentive program expenses” means expenses of a qualified provider of child day care services which constitute work incentive program expenses as defined in section 50B(a)(1) of the Internal Revenue Code of 1954, or which would constitute work incentive program expenses as so defined if the provider were a taxpayer entitled to a credit (with respect to the wages involved) under section 40 of such Code.

## DEFINITIONS

SEC. 2008. For purposes of this title—

(1) the term “State supplementary payment” means any cash payment made by a State on a regular basis to an individual who is receiving supplemental security income benefits under title XVI or who would but for his income be eligible to receive such benefits, as assistance based on need in supplementation of such benefits, as determined by the Secretary, and

(2) the term “State” means the fifty States and the District of Columbia.

---

**Provision Deemed to be in Social Security Act, as in Effect Prior to  
October 30, 1981 (46 Federal Register 53791)  
[Cost-of-Living Increase; Extension]**

SEC. 215.

(a)

**TABLE FOR DETERMINING PRIMARY INSURANCE AMOUNT AND MAXIMUM FAMILY BENEFITS BEGINNING JANUARY 1980<sup>1 2</sup>**

I (Primary insurance benefit under 1939 Act, as modified)		II (Primary insurance amount effective for June 1979)	III (Average monthly wage)		IV (Primary insurance amount)	V (Maximum family benefits)
If an individual's primary insurance benefit (as determined under subsec. (d)) is—		Or his primary insurance amount (as determined under subsec. (c)) is—	Or his average monthly wage (as determined under subsec. (b)) is—		The amount referred to in the preceding paragraphs of this subsection shall be—	And the maximum amount of benefits payable (as provided in sec. 203(a)) on the basis of his wages and self-employment income shall be—
At least—	But not more than—		At least—	But not more than—		
			\$2,161	\$2,165	\$1,041.10	\$1,822.00
			2,166	2,170	1,042.10	1,823.70
			2,171	2,175	1,043.10	1,825.50
			2,176	2,180	1,044.10	1,827.20
			2,181	2,185	1,045.10	1,829.00
			2,186	2,190	1,046.10	1,830.70
			2,191	2,195	1,047.10	1,832.50
			2,196	2,200	1,048.10	1,834.20
			2,201	2,205	1,049.10	1,836.00
			2,206	2,210	1,050.10	1,837.70
			2,211	2,215	1,051.10	1,839.50
			2,216	2,220	1,052.10	1,841.20
			2,221	2,225	1,053.10	1,843.00
			2,226	2,230	1,054.10	1,844.70
			2,231	2,235	1,055.10	1,846.50
			2,236	2,240	1,056.10	1,848.20
			2,241	2,245	1,057.10	1,850.00
			2,246	2,250	1,058.10	1,851.70
			2,251	2,255	1,059.10	1,853.50
			2,256	2,260	1,060.10	1,855.20
			2,261	2,265	1,061.10	1,857.00
			2,266	2,270	1,062.10	1,858.70
			2,271	2,275	1,063.10	1,860.50
			2,276	2,280	1,064.10	1,862.20
			2,281	2,285	1,065.10	1,864.00
			2,286	2,290	1,066.10	1,865.70
			2,291	2,295	1,067.10	1,867.50
			2,296	2,300	1,068.10	1,869.20
			2,301	2,305	1,069.10	1,871.00
			2,306	2,310	1,070.10	1,872.70
			2,311	2,315	1,071.10	1,874.50
			2,316	2,320	1,072.10	1,876.20
			2,321	2,325	1,073.10	1,878.00
			2,326	2,330	1,074.10	1,879.70
			2,331	2,335	1,075.10	<sup>a</sup> 1,881.50

SUPERSEDED PROVISIONS—SOCIAL SECURITY ACT

I (Primary insurance benefit under 1939 Act, as modified)		II (Primary insurance amount effective for June 1979)	III (Average monthly wage)		IV (Primary insurance amount)	V (Maximum family benefits)
If an individual's primary insurance benefit (as determined under subsec. (d)) is—		Or his primary insurance amount (as determined under subsec. (c)) is—	Or his average monthly wage (as determined under subsec. (b)) is—		The amount referred to in the preceding paragraphs of this subsection shall be—	And the maximum amount of benefits payable (as provided in sec. 203(a)) on the basis of his wages and self-employment income shall be—
At least—	But not more than—		At least—	But not more than—		
			2,336	2,340	1,076.10	*1,883.20
			2,341	2,345	1,077.10	1,885.00
			2,346	2,350	1,078.10	1,886.70
			2,351	2,355	1,079.10	1,888.50
			2,356	2,360	1,080.10	1,890.20
			2,361	2,365	1,081.10	1,892.00
			2,366	2,370	1,082.10	1,893.70
			2,371	2,375	1,083.10	1,895.50
			2,376	2,380	1,084.10	1,897.20
			2,381	2,385	1,085.10	1,899.00
			2,386	2,390	1,086.10	1,900.70
			2,391	2,395	1,087.10	1,902.50
			2,396	2,400	1,088.10	1,904.20
			2,401	2,405	1,089.10	1,906.00
			2,406	2,410	1,090.10	1,907.70
			2,411	2,415	1,091.10	1,909.50
			2,416	2,420	1,092.10	1,911.20
			2,421	2,425	1,093.10	1,913.00
			2,426	2,430	1,094.10	1,914.70
			2,431	2,435	1,095.10	1,916.50
			2,436	2,440	1,096.10	1,918.20
			2,441	2,445	1,097.10	1,920.00
			2,446	2,450	1,098.10	1,921.70
			2,451	2,455	1,099.10	1,923.50
			2,456	2,460	1,100.10	1,925.20
			2,461	2,465	1,101.10	1,927.00
			2,466	2,470	1,102.10	1,928.70
			2,471	2,475	1,103.10	1,930.50

<sup>1</sup>As in original. "1980" should read "1981".

<sup>2</sup>This extension was published at 45 FR 76252, November 18, 1980, and corrected at 45 FR 80189, December 3, 1980. This data was prepared and published as required by Social Security Act §215(a)(5) and §215(i)(2)(D).

<sup>3</sup>The Federal Register of December 3, 1980 at 45 FR 80189 struck out "1,861.50" and substituted "1,881.50".

<sup>4</sup>The Federal Register of December 3, 1980 at 45 FR 80189 struck out "1,863.20" and substituted "1,883.20".

Provisions of the Social Security Act As in Effect Prior to  
P.L. 97-123, Approved December 29, 1981 (95 Stat. 1659)  
[Amendments to P.L. 97-35]

BENEFITS FOR INDIVIDUALS FORMERLY RECEIVING MINIMUM BENEFITS  
UNDER TITLE II

SEC. 1622. (a) Any individual who—



- (1) is 60 years of age or older but has not attained the age of 65;
- (2) would be an eligible individual or eligible spouse under section 1611 if such individual were 65 years of age;
- (3) is not otherwise eligible for a benefit under section 1611;
- (4) for the month of February 1982 was entitled to a monthly benefit under title II of this Act for which he made application prior to March 1, 1982, as determined without regard to any deductions on account of work required by section 203, which entitlement amount (as so determined) was reduced for any month by reason of the amendments made by section 2201 of the Omnibus Budget Reconciliation Act of 1981 (relating to the repeal of the minimum benefit provisions); and
- (5) is not entitled under title II to a monthly benefit, as determined without regard to any deductions on account of work required by section 203, in an amount equal to or greater than such entitlement amount (as so determined) for February 1982;

shall be eligible for a benefit for each month in which he meets the requirements of this subsection in an amount determined under subsection (b) or (c).

(b) The amount of the monthly benefit payable under subsection (a) shall be the amount of the monthly benefit which would otherwise be payable to such individual under this title if he were 65 years of age; except that—

- (1) the amount of such monthly benefit shall not exceed—

(A) in the case of an individual described in subsection (a) who does not have an eligible spouse, an amount equal to the amount by which such individual's monthly benefit entitlement under title II for such month as determined without regard to any deductions on account of work required by section 203, is less than the amount of such individual's monthly benefit entitlement under title II for February 1982 (as so determined); or

(B) in the case of an individual and his spouse, both of whom are individuals described in subsection (a), an amount equal to the amount by which the combined amount of their monthly benefit entitlements under title II for such month (as so determined), is less than the combined amount of their monthly benefit entitlements under title II for February 1982 (as so determined);

(2) the benefit amount shall be determined on the basis of the dollar amounts applicable under this title for February 1982 (without regard to cost-of-living adjustments made after February 1982 under section 1617) in the case of any individuals described in paragraph (1); and

(3) in the case of an individual described in subsection (a) who has a spouse eligible for benefits under this title, other than by reason of this section, the amount of such monthly benefit for such individual (described in subsection (a)) shall be determined under subsection (c), and the amount of the monthly benefit for such spouse shall be determined in the same manner as for an individual who does not have an eligible spouse.

(c) The amount of the monthly benefit for an individual described in subsection (b)(3) shall be an amount equal to the amount by which—

(1) the monthly benefit amount for which such individual and his spouse would be eligible for such month under this title if both he and his spouse were 65 years of age, determined on the basis of the dollar amounts applicable under this title for February 1982 (without regard to cost-of-living adjustments made after February 1982 under section 1617); exceeds

(2) the monthly benefit amount under this title for which his spouse is eligible for such month;

except that the amount of such monthly benefit shall not exceed the amount by which such individual's monthly benefit entitlement under title II for such month, as determined without regard to deductions on account of work under section 203, is less than his monthly benefit entitlement under title II (as so determined) for February 1982.

(d) An individual who is entitled to a benefit under this section shall not be considered to be an individual receiving supplemental security income benefits under this title for purposes of section 1616 of this title or of any provision of law other than this title.

**SUPERSEDED PROVISIONS—SOCIAL SECURITY ACT**

310 47 FR 20863

337 03/86

**Provision Deemed to be in the Social Security Act as in Effect Prior to  
May 14, 1982 (47 Federal Register 20863)  
[Cost-of-Living Increase]**

**TABLE 1.—TABLE FOR DETERMINING PRIMARY INSURANCE AMOUNT AND MAXIMUM  
FAMILY BENEFITS BEGINNING JUNE 1981<sup>1</sup>**

I (Primary insurance benefit under 1939 Act, as modified)		II (Primary insurance amount eff- ective for June 1980)	III (Average monthly wage)		IV (Primary insurance amount)	V (Maximum family ben- efits)
If an individual's primary insurance benefit (as deter- mined under subsec. (d)) is—		Or his pri- mary insur- ance amount (as determined under sub- sec. (c)) is—	Or his average monthly wage (as de- termined under sub- sec. (b)) is—		The amount referred to in the pre- ceding para- graphs of this sub- section shall be—	And the maximum amount of benefits payable (as provided in sec. 203(a)) on the basis of his wages and self- employ- ment in- come shall be—
At least—	But not more than—		At least—	But not more than—		
	\$16.20	\$153.10		\$76	\$170.30	\$255.50
\$16.21	16.84	155.50	\$77	78	173.00	259.50
16.85	17.60	159.20	79	80	177.10	265.70
17.61	18.40	162.00	81	81	180.20	270.50
18.41	19.24	164.90	82	83	183.40	275.20
19.25	20.00	168.40	84	85	187.30	281.10
20.01	20.64	171.60	86	87	190.90	286.40
20.65	21.28	174.20	88	89	193.80	290.70
21.29	21.88	177.70	90	90	197.70	296.60
21.89	22.28	180.80	91	92	201.10	301.70
22.29	22.68	183.70	93	94	204.30	306.50
22.69	23.08	186.70	95	96	207.70	311.60
23.09	23.44	190.10	97	97	211.40	317.20
23.45	23.76	193.20	98	99	214.90	322.40
23.77	24.20	197.00	100	101	219.10	328.70
24.21	24.60	199.70	102	102	222.10	333.30
24.61	25.00	203.00	103	104	225.80	338.70
25.01	25.48	206.80	105	106	230.00	345.10
25.49	25.92	210.20	107	107	233.80	350.80
25.93	26.40	213.40	108	109	237.40	356.10
26.41	26.94	216.80	110	113	241.10	361.70
26.95	27.46	219.80	114	118	244.50	366.80
27.47	28.00	223.20	119	122	248.20	372.30
28.01	28.68	226.70	123	127	252.10	378.20
28.69	29.25	230.00	128	132	255.80	383.70
29.26	29.68	233.10	133	136	259.30	389.00
29.69	30.36	236.30	137	141	262.80	394.30
30.37	30.92	239.70	142	146	266.60	399.90
30.93	31.36	243.30	147	150	270.60	405.90
31.37	32.00	246.10	151	155	273.70	410.60
32.01	32.60	249.70	156	160	277.70	416.60
32.61	33.20	253.00	161	164	281.40	422.10
33.21	33.88	256.20	165	169	284.90	427.40
33.89	34.50	259.70	170	174	288.80	433.30
34.51	35.00	262.80	175	178	292.30	438.50
35.01	35.80	266.30	179	183	296.20	444.30
35.81	36.40	269.50	184	188	299.70	449.60
36.41	37.08	273.00	189	193	303.60	455.50

## SUPERSEDED PROVISIONS—SOCIAL SECURITY ACT

337 03/86

47 FR 20863

311

I (Primary insurance benefit under 1939 Act, as modified)		II (Primary insurance amount effective for June 1980)	III (Average monthly wage)		IV (Primary insurance amount)	V (Maximum family benefits)
If an individual's primary insurance benefit (as determined under subsec. (d)) is—		Or his primary insurance amount (as determined under subsec. (c)) is—	Or his average monthly wage (as determined under subsec. (b)) is—		The amount referred to in the preceding paragraphs of this subsection shall be—	And the maximum amount of benefits payable (as provided in sec. 203(a)) on the basis of his wages and self-employment income shall be—
At least—	But not more than—		At least—	But not more than—		
37.09	37.60	276.30	194	197	307.30	461.00
37.61	38.20	279.50	198	202	310.90	466.40
38.21	39.12	283.20	203	207	315.00	472.50
39.13	39.68	286.50	208	211	318.60	478.00
39.69	40.33	289.10	212	216	321.50	482.30
40.34	41.12	292.80	217	221	325.60	488.40
41.13	41.76	296.10	222	225	329.30	494.00
41.77	42.44	299.70	226	230	333.30	500.00
42.45	43.20	302.90	231	235	336.90	505.50
43.21	43.76	306.60	236	239	341.00	511.60
43.77	44.44	309.50	240	244	344.20	518.60
44.45	44.88	312.50	245	249	347.50	529.40
44.89	45.60	316.40	250	253	351.90	537.90
		319.50	254	258	355.30	548.40
		322.30	259	263	358.40	558.80
		326.30	264	267	362.90	567.30
		329.30	268	272	366.20	578.10
		332.90	273	277	370.20	588.40
		336.00	278	281	373.70	596.90
		339.30	282	286	377.40	607.60
		342.90	287	291	381.40	618.40
		345.70	292	295	384.50	626.70
		349.50	296	300	388.70	637.20
		352.70	301	305	392.30	648.10
		355.80	306	309	395.70	656.50
		359.40	310	314	399.70	667.00
		362.30	315	319	402.90	677.80
		365.70	320	323	406.70	686.20
		369.10	324	328	410.50	696.70
		372.20	329	333	413.90	707.30
		376.10	334	337	418.30	716.10
		378.70	338	342	421.20	726.40
		382.30	343	347	425.20	737.10
		385.90	348	351	429.20	745.50
		388.80	352	356	432.40	756.10
		392.60	357	361	436.60	766.80
		395.60	362	365	440.00	775.30
		398.70	366	370	443.40	785.90
		402.30	371	375	447.40	796.20
		405.70	376	379	451.20	805.10
		409.10	380	384	455.00	815.80
		412.10	385	389	458.30	826.20
		415.30	390	393	461.90	834.60
		419.00	394	398	466.00	845.50
		422.20	399	403	469.50	856.00
		425.80	404	407	473.50	864.30
		428.60	408	412	476.70	875.10
		431.60	413	417	480.00	885.50



# SUPERSEDED PROVISIONS—SOCIAL SECURITY ACT

312 47 FR 20863

337 03/86

I (Primary insurance benefit under 1939 Act, as modified)		II (Primary insurance amount effective for June 1980)	III (Average monthly wage)		IV (Primary insurance amount)	V (Maximum family benefits)
If an individual's primary insurance benefit (as determined under subsec. (d)) is—		Or his primary insurance amount (as determined under subsec. (c)) is—	Or his average monthly wage (as determined under subsec. (b)) is—		The amount referred to in the preceding paragraphs of this subsection shall be—	And the maximum amount of benefits payable (as provided in sec. 203(a)) on the basis of his wages and self-employment income shall be—
At least—	But not more than—		At least—	But not more than—		
		434.70	418	421	483.40	894.00
		438.20	422	426	487.30	904.70
		441.10	427	431	490.60	915.20
		443.80	432	436	493.60	925.90
		447.50	437	440	497.70	930.10
		450.30	441	445	500.80	935.70
		453.40	446	450	504.20	940.80
		456.70	451	454	507.90	944.80
		459.80	455	459	511.30	950.10
		462.70	460	464	514.60	955.30
		465.60	465	468	517.80	959.90
		469.30	469	473	521.90	965.00
		471.90	474	478	524.80	970.40
		475.00	479	482	528.20	974.70
		478.30	483	487	531.90	980.20
		481.40	488	492	535.40	985.50
		484.30	493	496	538.60	989.70
		487.80	497	501	542.50	994.80
		490.60	502	506	545.60	1000.00
		493.60	507	510	548.90	1004.40
		496.70	511	515	552.40	1009.70
		500.10	516	520	556.20	1015.30
		503.00	521	524	559.40	1019.20
		505.90	525	529	562.60	1024.60
		509.60	530	534	566.70	1029.80
		512.20	535	538	569.60	1034.10
		515.40	539	543	573.20	1039.50
		518.60	544	548	576.70	1044.80
		521.80	549	553	580.30	1050.10
		524.70	554	556	583.50	1053.20
		527.20	557	560	586.30	1057.50
		530.10	561	563	589.50	1060.80
		532.80	564	567	592.50	1065.00
		535.90	568	570	596.00	1068.00
		538.40	571	574	598.80	1072.20
		541.10	575	577	601.80	1075.70
		543.70	578	581	604.60	1079.70
		546.50	582	584	607.80	1083.00
		548.90	585	588	610.40	1087.30
		552.20	589	591	614.10	1090.40
		554.90	592	595	617.10	1094.60
		557.60	596	598	620.10	1097.50
		560.30	599	602	623.10	1102.20
		563.00	603	605	626.10	1105.30
		565.70	606	609	629.10	1109.30
		568.70	610	612	632.40	1112.70
		571.30	613	616	635.30	1116.90
		574.00	617	620	638.30	1121.20

## SUPERSEDED PROVISIONS—SOCIAL SECURITY ACT

337 03/86

47 FR 20863

313

I (Primary insurance benefit under 1939 Act, as modified)		II (Primary insurance amount effective for June 1980)	III (Average monthly wage)		IV (Primary insurance amount)	V (Maximum family benefits)
If an individual's primary insurance benefit (as determined under subsec. (d)) is—		Or his primary insurance amount (as determined under subsec. (c)) is—	Or his average monthly wage (as determined under subsec. (b)) is—		The amount referred to in the preceding paragraphs of this subsection shall be—	And the maximum amount of benefits payable (as provided in sec. 203(a)) on the basis of his wages and self-employment income shall be—
At least—	But not more than—		At least—	But not more than—		
		576.80	621	623	641.50	1124.30
		579.40	624	627	644.30	1128.60
		582.20	628	630	647.50	1132.60
		584.90	631	634	650.50	1138.20
		587.80	635	637	653.70	1143.50
		590.60	638	641	656.80	1149.00
		593.20	642	644	659.70	1154.10
		596.00	645	648	662.80	1159.60
		598.60	649	652	665.70	1164.80
		600.40	653	656	667.70	1168.10
		602.10	657	660	669.60	1171.30
		604.20	661	665	671.90	1175.70
		606.30	666	670	674.30	1179.90
		608.60	671	675	676.80	1183.80
		610.80	676	680	679.30	1188.10
		612.80	681	685	681.50	1192.30
		615.20	686	690	684.20	1196.30
		617.20	691	695	686.40	1201.00
		619.20	696	700	688.60	1205.00
		621.50	701	705	691.20	1209.20
		623.70	706	710	693.60	1213.50
		626.00	711	715	696.20	1217.50
		628.10	716	720	698.50	1221.80
		630.30	721	725	700.90	1226.00
		632.50	726	730	703.40	1230.40
		634.60	731	735	705.70	1234.60
		636.80	736	740	708.20	1238.70
		638.90	741	745	710.50	1243.20
		640.80	746	750	712.60	1247.00
		642.90	751	755	715.00	1250.90
		644.80	756	760	717.10	1254.20
		646.60	761	765	719.10	1257.90
		648.20	766	770	720.80	1261.50
		650.10	771	775	723.00	1264.80
		651.90	776	780	725.00	1268.30
		653.80	781	785	727.10	1271.80
		655.40	786	790	728.90	1275.30
		657.20	791	795	730.90	1278.80
		659.10	796	800	733.00	1282.40
		661.00	801	805	735.10	1286.00
		662.80	806	810	737.10	1289.40
		664.60	811	815	739.10	1293.10
		666.40	816	820	741.10	1296.40
		668.20	821	825	743.10	1300.10
		670.00	826	830	745.10	1303.50
		671.80	831	835	747.10	1307.20
		673.50	836	840	749.00	1310.50
		675.40	841	845	751.10	1314.30

## SUPERSEDED PROVISIONS—SOCIAL SECURITY ACT

314 47 FR 20863

337 03/86

I (Primary insurance benefit under 1939 Act, as modified)		II (Primary insurance amount ef- fective for June 1980)	III (Average monthly wage)		IV (Primary insurance amount)	V (Maximum family ben- efits)
If an individual's primary insurance benefit (as deter- mined under subsec. (d)) is—		Or his pri- mary insur- ance amount (as determined under sub- sec. (c)) is—	Or his average monthly wage (as de- termined under sub- sec. (b)) is—		The amount referred to in the pre- ceding para- graphs of this sub- section shall be—	And the maximum amount of benefits payable (as provided in sec. 203(a)) on the basis of his wages and self- employ- ment in- come shall be—
At least—	But not more than—		At least—	But not more than—		
		677.00	846	850	752.90	1317.40
		679.10	851	855	755.20	1321.20
		680.80	856	860	757.10	1324.60
		682.60	861	865	759.10	1328.20
		684.50	866	870	761.20	1331.70
		686.30	871	875	763.20	1335.20
		688.00	876	880	765.10	1338.60
		689.90	881	885	767.20	1342.30
		691.50	886	890	769.00	1345.60
		693.40	891	895	771.10	1349.60
		695.20	896	900	773.10	1352.70
		697.20	901	905	775.30	1356.40
		698.90	906	910	777.20	1359.90
		700.80	911	915	779.30	1363.50
		702.70	916	920	781.50	1366.70
		704.30	921	925	783.20	1370.50
		706.00	926	930	785.10	1373.80
		707.80	931	935	787.10	1377.40
		709.70	936	940	789.20	1380.90
		711.50	941	945	791.20	1384.50
		713.30	946	950	793.20	1387.90
		715.20	951	955	795.40	1391.60
		717.20	956	960	797.60	1395.10
		719.00	961	965	799.60	1398.40
		720.40	966	970	801.10	1402.10
		722.30	971	975	803.20	1405.70
		724.10	976	980	805.20	1409.00
		726.10	981	985	807.50	1412.50
		727.70	986	990	809.30	1416.10
		729.50	991	995	811.30	1419.70
		731.50	996	1000	813.50	1423.00
		733.10	1001	1005	815.30	1426.00
		734.40	1006	1010	816.70	1429.40
		736.30	1011	1015	818.80	1432.40
		738.00	1016	1020	820.70	1435.90
		739.50	1021	1025	822.40	1438.80
		740.90	1026	1030	823.90	1442.00
		742.80	1031	1035	826.00	1445.20
		744.30	1036	1040	827.70	1448.30
		746.00	1041	1045	829.60	1451.70
		747.80	1046	1050	831.60	1454.70
		749.10	1051	1055	833.00	1457.50
		750.80	1056	1060	834.90	1461.10
		752.60	1061	1065	836.90	1464.10
		754.20	1066	1070	838.70	1467.40
		755.80	1071	1075	840.50	1470.60
		757.30	1076	1080	842.20	1473.70
		759.10	1081	1085	844.20	1476.80



## SUPERSEDED PROVISIONS—SOCIAL SECURITY ACT

337 03/86

47 FR 20863

315

I (Primary insurance benefit under 1939 Act, as modified)		II (Primary insurance amount effective for June 1980)	III (Average monthly wage)		IV (Primary insurance amount)	V (Maximum family benefits)
If an individual's primary insurance benefit (as determined under subsec. (d)) is—		Or his primary insurance amount (as determined under subsec. (c)) is—	Or his average monthly wage (as determined under subsec. (b)) is—		The amount referred to in the preceding paragraphs of this subsection shall be—	And the maximum amount of benefits payable (as provided in sec. 203(a)) on the basis of his wages and self-employment income shall be—
At least—	But not more than—		At least—	But not more than—		
		760.60	1086	1090	845.80	1479.90
		762.30	1091	1095	847.70	1483.20
		764.10	1096	1100	849.70	1486.50
		765.40	1101	1105	851.20	1489.40
		767.10	1106	1110	853.10	1492.70
		768.80	1111	1115	855.00	1495.70
		770.40	1116	1120	856.70	1499.10
		772.10	1121	1125	858.60	1502.10
		773.60	1126	1130	860.30	1505.40
		775.20	1131	1135	862.10	1508.30
		776.90	1136	1140	864.00	1511.80
		778.70	1141	1145	866.00	1514.90
		780.30	1146	1150	867.70	1518.00
		781.60	1151	1155	869.20	1521.00
		783.50	1156	1160	871.30	1524.30
		785.10	1161	1165	873.10	1527.50
		786.70	1166	1170	874.90	1530.80
		788.40	1171	1175	876.80	1533.90
		789.90	1176	1180	878.40	1537.10
		791.30	1181	1185	880.00	1539.80
		792.90	1186	1190	881.80	1542.70
		794.30	1191	1195	883.30	1545.80
		795.90	1196	1200	885.10	1548.70
		797.40	1201	1205	886.80	1551.50
		799.00	1206	1210	888.50	1554.70
		800.40	1211	1215	890.10	1557.50
		801.90	1216	1220	891.80	1560.40
		803.50	1221	1225	893.50	1563.20
		805.10	1226	1230	895.30	1566.30
		806.40	1231	1235	896.80	1569.10
		807.90	1236	1240	898.40	1572.20
		809.50	1241	1245	900.20	1575.20
		811.00	1246	1250	901.90	1578.10
		812.50	1251	1255	903.50	1580.90
		814.00	1256	1260	905.20	1583.90
		815.60	1261	1265	907.00	1586.90
		817.00	1266	1270	908.60	1589.80
		818.40	1271	1275	910.10	1592.50
		820.00	1276	1280	911.90	1595.70
		821.30	1281	1285	913.30	1598.30
		822.80	1286	1290	915.00	1601.10
		824.30	1291	1295	916.70	1603.80
		825.60	1296	1300	918.10	1606.60
		827.00	1301	1305	919.70	1609.30
		828.40	1306	1310	921.20	1612.10
		829.90	1311	1315	922.90	1614.80
		831.40	1316	1320	924.60	1617.60
		832.70	1321	1325	926.00	1620.20

## SUPERSEDED PROVISIONS—SOCIAL SECURITY ACT

316 47 FR 20863

337 03/86

I (Primary insurance benefit under 1939 Act, as modified)		II (Primary insurance amount ef- fective for June 1980)	III (Average monthly wage)		IV (Primary insurance amount)	V (Maximum family ben- efits)
If an individual's primary insurance benefit (as deter- mined under subsec. (d)) is—		Or his pri- mary insur- ance amount (as determined under sub- sec. (c)) is—	Or his average monthly wage (as de- termined under sub- sec. (b)) is—		The amount referred to in the pre- ceding para- graphs of this sub- section shall be—	And the maximum amount of benefits payable (as provided in sec. 203(a)) on the basis of his wages and self- employ- ment in- come shall be—
At least—	But not more than—		At least—	But not more than—		
		834.20	1326	1330	927.70	1623.20
		835.50	1331	1335	929.10	1625.90
		837.00	1336	1340	930.80	1628.70
		838.40	1341	1345	932.40	1631.40
		839.70	1346	1350	933.80	1634.10
		841.20	1351	1355	935.50	1636.80
		842.60	1356	1360	937.00	1639.60
		844.20	1361	1365	938.80	1642.30
		845.40	1366	1370	940.10	1645.10
		846.90	1371	1375	941.80	1647.80
		848.30	1376	1380	943.40	1650.60
		849.50	1381	1385	944.70	1653.10
		850.90	1386	1390	946.30	1655.80
		852.20	1391	1395	947.70	1658.40
		853.50	1396	1400	949.10	1661.00
		854.90	1401	1405	950.70	1663.50
		856.20	1406	1410	952.10	1666.20
		857.50	1411	1415	953.60	1668.80
		858.90	1416	1420	955.10	1671.50
		860.20	1421	1425	956.60	1674.10
		861.50	1426	1430	958.00	1676.70
		863.00	1431	1435	959.70	1679.20
		864.30	1436	1440	961.20	1681.80
		865.60	1441	1445	962.60	1684.30
		867.00	1446	1450	964.20	1687.20
		868.30	1451	1455	965.60	1689.60
		869.60	1456	1460	967.00	1692.30
		871.00	1461	1465	968.60	1694.80
		872.30	1466	1470	970.00	1697.40
		873.60	1471	1475	971.50	1700.00
		874.90	1476	1480	972.90	1702.50
		876.20	1481	1485	974.40	1705.10
		877.40	1486	1490	975.70	1707.30
		878.70	1491	1495	977.20	1709.90
		879.90	1496	1500	978.50	1712.30
		881.20	1501	1505	979.90	1714.90
		882.40	1506	1510	981.30	1717.10
		883.70	1511	1515	982.70	1719.60
		885.00	1516	1520	984.20	1722.10
		886.20	1521	1525	985.50	1724.70
		887.50	1526	1530	986.90	1726.90
		888.70	1531	1535	988.30	1729.40
		890.00	1536	1540	989.70	1731.90
		891.20	1541	1545	991.10	1734.40
		892.50	1546	1550	992.50	1736.70
		893.80	1551	1555	994.00	1739.20
		895.00	1556	1560	995.30	1741.70
		896.30	1561	1565	996.70	1744.20

## SUPERSEDED PROVISIONS—SOCIAL SECURITY ACT

337 03/86

47 FR 20863

317

I (Primary insurance benefit under 1939 Act, as modified)		II (Primary insurance amount effective for June 1980)	III (Average monthly wage)		IV (Primary insurance amount)	V (Maximum family benefits)
If an individual's primary insurance benefit (as determined under subsec. (d)) is—		Or his primary insurance amount (as determined under subsec. (c)) is—	Or his average monthly wage (as determined under subsec. (b)) is—		The amount referred to in the preceding paragraphs of this subsection shall be—	And the maximum amount of benefits payable (as provided in sec. 203(a)) on the basis of his wages and self-employment income shall be—
At least—	But not more than—		At least—	But not more than—		
		897.50	1566	1570	998.10	1746.40
		898.80	1571	1575	999.50	1749.00
		900.00	1576	1580	1000.80	1751.40
		901.30	1581	1585	1002.30	1753.90
		902.60	1586	1590	1003.70	1756.20
		903.80	1591	1595	1005.10	1758.80
		905.10	1596	1600	1006.50	1761.20
		906.30	1601	1605	1007.90	1763.70
		907.60	1606	1610	1009.30	1766.00
		908.80	1611	1615	1010.60	1768.60
		910.10	1616	1620	1012.10	1771.00
		911.40	1621	1625	1013.50	1773.50
		912.60	1626	1630	1014.90	1775.80
		913.90	1631	1635	1016.30	1778.40
		915.10	1636	1640	1017.60	1780.70
		916.40	1641	1645	1019.10	1783.30
		917.70	1646	1650	1020.50	1785.60
		918.90	1651	1655	1021.90	1788.10
		920.20	1656	1660	1023.30	1790.50
		921.40	1661	1665	1024.60	1793.00
		922.70	1666	1670	1026.10	1795.40
		923.90	1671	1675	1027.40	1797.90
		925.20	1676	1680	1028.90	1800.30
		926.50	1681	1685	1030.30	1802.80
		927.70	1686	1690	1031.70	1805.20
		929.00	1691	1695	1033.10	1807.70
		930.10	1696	1700	1034.30	1810.10
		931.40	1701	1705	1035.80	1812.60
		932.60	1706	1710	1037.10	1814.90
		933.90	1711	1715	1038.50	1817.40
		935.10	1716	1720	1039.90	1819.80
		936.40	1721	1725	1041.30	1822.40
		937.70	1726	1730	1042.80	1824.70
		938.90	1731	1735	1044.10	1827.20
		940.20	1736	1740	1045.60	1829.60
		941.40	1741	1745	1046.90	1832.20
		942.70	1746	1750	1048.30	1834.50
		943.90	1751	1755	1049.70	1837.00
		945.20	1756	1760	1051.10	1839.40
		946.50	1761	1765	1052.60	1842.00
		947.70	1766	1770	1053.90	1844.20
		949.00	1771	1775	1055.30	1846.70
		950.20	1776	1780	1056.70	1849.20
		951.50	1781	1785	1058.10	1851.80
		952.70	1786	1790	1059.50	1854.00
		954.00	1791	1795	1060.90	1856.50
		955.30	1796	1800	1062.30	1859.00
		956.50	1801	1805	1063.70	1861.50



**SUPERSEDED PROVISIONS—SOCIAL SECURITY ACT**

318 47 FR 20863

337 03/86

I (Primary insurance benefit under 1939 Act, as modified)		II (Primary insurance amount effective for June 1980)	III (Average monthly wage)		IV (Primary insurance amount)	V (Maximum family benefits)
If an individual's primary insurance benefit (as determined under subsec. (d)) is—		Or his primary insurance amount (as determined under subsec. (c)) is—	Or his average monthly wage (as determined under subsec. (b)) is—		The amount referred to in the preceding paragraphs of this subsection shall be—	And the maximum amount of benefits payable (as provided in sec. 203(a)) on the basis of his wages and self-employment income shall be—
At least—	But not more than—		At least—	But not more than—		
		957.80	1806	1810	1065.10	1863.80
		959.00	1811	1815	1066.50	1866.30
		960.30	1816	1820	1067.90	1868.80
		961.50	1821	1825	1069.20	1871.30
		962.80	1826	1830	1070.70	1873.50
		964.10	1831	1835	1072.10	1876.10
		965.30	1836	1840	1073.50	1878.60
		966.60	1841	1845	1074.90	1881.10
		967.80	1846	1850	1076.20	1883.30
		969.10	1851	1855	1077.70	1885.90
		970.30	1856	1860	1079.00	1888.30
		971.60	1861	1865	1080.50	1890.80
		972.90	1866	1870	1081.90	1893.10
		974.10	1871	1875	1083.20	1895.70
		975.40	1876	1880	1084.70	1898.10
		976.60	1881	1885	1086.00	1900.60
		977.90	1886	1890	1087.50	1902.90
		979.10	1891	1895	1088.80	1905.50
		980.40	1896	1900	1090.30	1907.90
		981.70	1901	1905	1091.70	1910.40
		982.90	1906	1910	1093.00	1912.70
		984.10	1911	1915	1094.40	1915.00
		985.20	1916	1920	1095.60	1917.40
		986.30	1921	1925	1096.80	1919.50
		987.50	1926	1930	1098.10	1921.80
		988.60	1931	1935	1099.40	1923.90
		989.80	1936	1940	1100.70	1926.30
		990.90	1941	1945	1101.90	1928.40
		992.10	1946	1950	1103.30	1930.70
		993.20	1951	1955	1104.50	1932.80
		994.30	1956	1960	1105.70	1935.20
		995.50	1961	1965	1107.00	1937.30
		996.60	1966	1970	1108.30	1939.60
		997.80	1971	1975	1109.60	1941.70
		998.90	1976	1980	1110.80	1944.00
		1000.10	1981	1985	1112.20	1946.20
		1001.20	1986	1990	1113.40	1948.50
		1002.30	1991	1995	1114.60	1950.60
		1003.50	1996	2000	1115.90	1952.90
		1004.60	2001	2005	1117.20	1955.10
		1005.80	2006	2010	1118.50	1957.40
		1006.90	2011	2015	1119.70	1959.50
		1008.10	2016	2020	1121.10	1961.80
		1009.20	2021	2025	1122.30	1964.00
		1010.30	2026	2030	1123.50	1966.30
		1011.50	2031	2035	1124.80	1968.40
		1012.60	2036	2040	1126.10	1970.70
		1013.80	2041	2045	1127.40	1972.80

## SUPERSEDED PROVISIONS—SOCIAL SECURITY ACT

337

03/86

47 FR 20863

319

I (Primary insurance benefit under 1939 Act, as modified)		II (Primary insurance amount ef- fective for June 1980)	III (Average monthly wage)		IV (Primary insurance amount)	V (Maximum family ben- efits)
If an individual's primary insurance benefit (as deter- mined under subsec. (d)) is—		Or his pri- mary insur- ance amount (as determined under sub- sec. (c)) is—	Or his average monthly wage (as de- termined under sub- sec. (b)) is—		The amount referred to in the pre- ceding para- graphs of this sub- section shall be—	And the maximum amount of benefits payable (as provided in sec. 203(a)) on the basis of his wages and self- employ- ment in- come shall be—
At least—	But not more than—		At least—	But not more than—		
		1014.90	2046	2050	1128.60	1975.20
		1016.10	2051	2055	1130.00	1977.30
		1017.20	2056	2060	1131.20	1979.60
		1018.30	2061	2065	1132.40	1981.70
		1019.50	2066	2070	1133.70	1984.10
		1020.60	2071	2075	1135.00	1986.20
		1021.80	2076	2080	1136.30	1988.50
		1022.90	2081	2085	1137.50	1990.60
		1024.10	2086	2090	1138.80	1993.00
		1025.20	2091	2095	1140.10	1995.10
		1026.30	2096	2100	1141.30	1997.40
		1027.50	2101	2105	1142.60	1999.50
		1028.60	2106	2110	1143.90	2001.90
		1029.80	2111	2115	1145.20	2004.00
		1030.90	2116	2120	1146.40	2006.30
		1032.10	2121	2125	1147.70	2008.40
		1033.20	2126	2130	1149.00	2010.80
		1034.40	2131	2135	1150.30	2012.90
		1035.50	2136	2140	1151.50	2015.20
		1036.60	2141	2145	1152.70	2017.30
		1037.80	2146	2150	1154.10	2019.70
		1038.90	2151	2155	1155.30	2021.80
		1040.10	2156	2160	1156.60	2024.10
		1041.10	2161	2165	1157.80	2026.10
		1042.10	2166	2170	1158.90	2028.00
		1043.10	2171	2175	1160.00	2030.00
		1044.10	2176	2180	1161.10	2031.90
		1045.10	2181	2185	1162.20	2033.90
		1046.10	2186	2190	1163.30	2035.80
		1047.10	2191	2195	1164.40	2037.80
		1048.10	2196	2200	1165.50	2039.70
		1049.10	2201	2205	1166.60	2041.70
		1050.10	2206	2210	1167.80	2043.60
		1051.10	2211	2215	1168.90	2045.60
		1052.10	2216	2220	1170.00	2047.50
		1053.10	2221	2225	1171.10	2049.50
		1054.10	2226	2230	1172.20	2051.40
		1055.10	2231	2235	1173.30	2053.40
		1056.10	2236	2240	1174.40	2055.20
		1057.10	2241	2245	1175.50	2057.20
		1058.10	2246	2250	1176.70	2059.10
		1059.10	2251	2255	1177.80	2061.10
		1060.10	2256	2260	1178.90	2063.00
		1061.10	2261	2265	1180.00	2065.00
		1062.10	2266	2270	1181.10	2066.90
		1063.10	2271	2275	1182.20	2068.90
		1064.10	2276	2280	1183.30	2070.80
		1065.10	2281	2285	1184.40	2072.80

**SUPERSEDED PROVISIONS—SOCIAL SECURITY ACT**

320 47 FR 20863

337 03/86

I (Primary insurance benefit under 1939 Act, as modified)		II (Primary insurance amount ef- fective for June 1980)		III (Average monthly wage)		IV (Primary insurance amount)	V (Maximum family ben- efits)
If an individual's primary insurance benefit (as deter- mined under subsec. (d)) is—		Or his pri- mary insur- ance amount (as determined under sub- sec. (c)) is—		Or his average monthly wage (as de- termined under sub- sec. (b)) is—		The amount referred to in the pre- ceding para- graphs of this sub- section shall be—	And the maximum amount of benefits payable (as provided in sec. 203(a)) on the basis of his wages and self- employ- ment in- come shall be—
At least—	But not more than—			At least—	But not more than—		
		1066.10		2286	2290	1185.60	2074.70
		1067.10		2291	2295	1186.70	2076.70
		1068.10		2296	2300	1187.80	2078.60
		1069.10		2301	2305	1188.90	2080.60
		1070.10		2306	2310	1190.00	2082.50
		1071.10		2311	2315	1191.10	2084.50
		1072.10		2316	2320	1192.20	2086.40
		1073.10		2321	2325	1193.30	2088.40
		1074.10		2326	2330	1194.40	2090.30
		1075.10		2331	2335	1195.60	2092.30
		1076.10		2336	2340	1196.70	2094.20
		1077.10		2341	2345	1197.80	2096.20
		1078.10		2346	2350	1198.90	2098.10
		1079.10		2351	2355	1200.00	2100.10
		1080.10		2356	2360	1201.10	2102.00
		1081.10		2361	2365	1202.20	2104.00
		1082.10		2366	2370	1203.30	2105.80
		1083.10		2371	2375	1204.50	2107.80
		1084.10		2376	2380	1205.60	2109.70
		1085.10		2381	2385	1206.70	2111.70
		1086.10		2386	2390	1207.80	2113.60
		1087.10		2391	2395	1208.90	2115.60
		1088.10		2396	2400	1210.00	2117.50
		1089.10		2401	2405	1211.10	2119.50
		1090.10		2406	2410	1212.20	2121.40
		1091.10		2411	2415	1213.40	2123.40
		1092.10		2416	2420	1214.50	2125.30
		1093.10		2421	2425	1215.60	2127.30
		1094.10		2426	2430	1216.70	2129.20
		1095.10		2431	2435	1217.80	2131.20
		1096.10		2436	2440	1218.90	2133.10
		1097.10		2441	2445	1220.00	2135.10
		1098.10		2446	2450	1221.10	2137.00
		1099.10		2451	2455	1222.20	2139.00
		1100.10		2456	2460	1223.40	2140.90
		1101.10		2461	2465	1224.50	2142.90
		1102.10		2466	2470	1225.60	2144.80
		1103.10		2471	2475	1226.70	2146.80

<sup>1</sup>This revised table of benefits was published in the Federal Register on May 15, 1981 (46 FR 27076), as required by P.L. 93-66, §203(f), which reads as follows:

"(f) Effective June 1, 1974, the Secretary of Health, Education, and Welfare, shall prescribe and publish in the Federal Register such modifications and extensions in the table contained in section 215(a) of the Social Security Act (which shall be determined in the same manner as the revisions in such table provided for under section 215(i)(2)(D) of such Act) as may be necessary to reflect the amendments made by this section; and such modified and extended table shall be deemed to be the table appearing in such section 215(a)."

This table was effective through May 1982. For the table effective beginning June 1982, see p. 355.



**SUPERSEDED PROVISIONS—SOCIAL SECURITY ACT**

337 03/86

P.L. 97-248 §403. 321

**TABLE 2.—TABLE FOR DETERMINING PRIMARY INSURANCE AMOUNT AND MAXIMUM FAMILY BENEFITS UNDER SUBPARAGRAPH (C)(i)(II) OF SUBSECTION 215(a)(1) BEGINNING JUNE 1981**

I (Years of coverage)	II (Primary insurance amount)	III (Maximum family benefits)
If an individual's years of coverage (as determined under sec. 215(a)(1)(C)(ii)) are—	The amount referred to in sec. 215(a)(1)(C)(i)(II) shall be—	And the maximum amount of benefits payable (as provided in sec. 215(i)(2)(D)) on the basis of his or her wages and self-employment income shall be—
11	16.30	24.50
12	32.30	48.50
13	48.40	72.70
14	64.40	96.70
15	80.40	120.70
16	96.60	144.90
17	112.60	168.90
18	128.70	193.10
19	144.70	217.10
20	160.70	241.10
21	176.90	265.40
22	192.90	289.40
23	209.10	313.70
24	225.10	337.70
25	241.10	361.70
26	257.30	386.00
27	273.30	410.00
28	289.30	434.00
29	305.40	458.10
30	321.40	482.10

NOTE: The amounts shown in the above table for years of coverage less than 19 are not payable for June 1981 through December 1981 because the corresponding values shown in column II are less than the \$135.70 minimum primary insurance amount payable for that period. For months after December 1981, a special minimum primary insurance amount of \$128.70 will be payable.

**Provisions of the Social Security Act as in Effect Prior to  
P.L. 97-248, Approved September 3, 1982 (96 Stat. 324)  
Tax Equity and Fiscal Responsibility Act of 1982**

SEC. 226.

(b)

(2) (B) is, and has been for not less than 24 months a disabled qualified railroad retirement beneficiary, within the meaning of section 7(d) of the Railroad Retirement Act of 1974,

SEC. 226A. (a)

(1)(A) is fully or currently insured (as such terms are defined in section 214 of this Act) or would be fully or currently insured if his service as an employee (as defined in the Railroad Retirement Act of 1974) after December 31, 1936, were included in the term "employment" as defined in this Act, or (B) is entitled to monthly insurance benefits under title II of this Act or an annuity under the Railroad Retirement Act of 1974, or (C) is the spouse or dependent child (as defined in regulations) of an individual who is fully or currently insured or would be fully or currently insured if his service as an employee (as defined in the Railroad Retirement Act of 1974) after December 31, 1936, were included in the term "employment" as defined in this Act, or (D) is the spouse or dependent child (as defined in regulations) of an individual entitled to monthly insurance benefits under title II of this Act or an annuity under the Railroad Retirement Act of 1974;

SEC. 403.

(i)(1) In the case of any calendar quarter which begins after September 30, 1977, and prior to April 1, 1978, the amount payable (as determined under subsection (a) or section 1118, as the case may be) to each State which has a State plan approved under

this part shall (subject to the succeeding paragraphs of this subsection) be increased by an amount equal to the sum of the following:

(A) an amount which bears the same ratio to \$46,750,000 as the amount expended as aid to families with dependent children under the State plan of such State during the month of December 1976 bears to the amount expended as aid to families with dependent children under the State plans of all States during such month, and

(B)(i) in the case of Puerto Rico, Guam, and the Virgin Islands, an amount equal to the amount determined under subparagraph (A) with respect to such State, or

(ii) in the case of any other State, an amount which bears the same ratio to \$46,750,000, minus the amounts determined under clause (i) of this subparagraph, as the amount allocated to such State under section 106 of the State and Local Fiscal Assistance Act of 1972, for the most recent entitlement period for which allocations have been made under such section prior to the date of the enactment of this subsection, bears to the total of the amounts allocated to all States under such section 106 for such period.

(2) As a condition of any State receiving an increase, by reason of the application of the foregoing provisions of this subsection, in the amount determined for such State pursuant to subsection (a) or under section 1118 (as the case may be), such State must agree to pay to any political subdivision thereof which participates in the cost of the State's plan approved under this part, during any calendar quarter with respect to which such increase applies, so much of such increase as does not exceed 100 per centum of such political subdivision's financial contribution to the State's plan for such quarter.

(3) Notwithstanding any other provision of this part, the amount payable to any State by reason of the preceding provisions of this subsection for calendar quarters prior to April 1, 1978, shall be made in a single installment, which shall be payable as shortly after October 1, 1977, as is administratively feasible.

PRORATING OF SHELTER ALLOWANCE IN CERTAIN CASES WHERE CHILD LIVES WITH RELATIVE NOT LEGALLY RESPONSIBLE FOR HIS SUPPORT

SEC. 412. (a) Notwithstanding any other provision of this part, a State plan for aid and services to needy families with children shall not be regarded as failing to comply with the requirements imposed under this part solely because, under such plan, in any case in which one or more children live in any household—

(1)(A) in which the total income of such child or children and the closely related family members (as defined in subsection (b)) living in the same household equals or exceeds the standard of need under such plan for a family equal in number to the total number of such children and closely related family members in the same household, or (B) where the income of children and family members cannot be determined due to failure to cooperate, and

(2) which (A) does not include a relative (specified in section 406(a)(1)) who is legally responsible for the support of the child or children, or (B) includes one or more such relatives who is legally responsible for the support of the child or children but none of whom is eligible for aid under the State plan because such relative is being supported by another person or under another program, the amount of the aid furnished with respect to such child or children for shelter, utilities, and similar expenses, bears the same ratio to the total amount which would be furnished for such expenses, if all the closely related family members with whom such child or children are living were eligible for such aid, as the number of such children bears to the total number of such children and closely related family members.

(b) For purposes of subsection (a), the term "closely related family members" of a child means those relatives of his who are specified in section 406(a)(1) and any other individual for whose support such a relative is legally responsible, but does not include a stepparent whose income is taken into consideration under section 402(a)(31) (regardless of whether such income exceeds the sum specified in such section) or any other such relative or other individual (1) with respect to whom benefits are provided under another public program eligibility for which is based on need, or (2) whose presence in the home would not increase the total amount which would be allowed for shelter, utilities, and similar expenses if he was eligible for aid.

(c) The amount of aid to families with dependent children for shelter, utilities, and similar expenses shall be identified, for purposes of this section, in the following manner:

(1) If the State plan approved under this part provides for paying 100 per centum of the standard of need specified in the plan, and designates a portion of that standard, for families of specified sizes, to meet shelter, utilities, and similar



expenses, then an amount equal to that portion shall be considered the total amount for such expenses for a family of the specified size.

(2) If such plan provides for meeting less than 100 per centum of such standard, and designates a portion of that standard, for families of specified sizes, to meet such expenses, then an amount equal to that portion, multiplied by the proportion of the standard of need which such State pays as aid to families with dependent children, shall be considered the total amount for such expenses for a family of the specified size.

(3) If such plan does not designate any portion of the standard of need for meeting such expenses, then such portion shall be prescribed by the Secretary, but in no event shall such portion exceed 30 per centum of the standard of need for a family of a specified size, multiplied by the proportion of such standard which the State pays as aid to families with dependent children.

(d) For purposes of subsection (a), the total income of the child or children and the closely related family members (as defined in subsection (b)) shall be determined as it would be if all such individuals were applicants for aid under the State plan and shall not include any income which any such individual is obligated to apply to the support of any other individual not living in the household.

#### SEC. 454.

(6) (C) the State will retain, but only if it is the State which makes the collection, the fee imposed under State law as required under paragraph (19);

(19) provide that a fee shall be imposed on the individual who owes a child or spousal support obligation, in accordance with State law, with respect to all such child and spousal support obligations for which collection is made by the State agency under this part on behalf of an individual not otherwise eligible for collection services (as determined for purposes of paragraph (6)) in an amount equal to 10 percent of the amount so owed (and for purposes of this part, no part of the amount collected shall be considered to be a fee collected except amounts which exceed the actual amount of support owed); and

#### SEC. 455.

(c)(1) Subject to paragraph (2), there shall be included, in determining amounts expended by a State during any quarter for the operation of the plan approved under section 454, so much of the expenditures of courts of such State and its political subdivisions (excluding expenditures for or in connection with judges and other individuals making judicial determinations, but not excluding expenditures for or in connection with their administrative and support personnel) as are attributable to the performance of services which are directly related to, and clearly identifiable with, the operation of such plan.

(2) The aggregate amount of the expenditures which are included pursuant to paragraph (1) for the quarters in any calendar year shall be reduced (but not below zero) by the total amount of expenditures described in paragraph (1) which were made by the State for the 12-month period beginning January 1, 1978.

(3) The State agency may, if the law (or procedures established thereunder) of the State so provides, pay so much of the amount it receives under subsection (a) for any quarter as is payable by reason of the provisions of this subsection directly to the courts of the State (or political subdivisions thereof) furnishing the services on account of which the payment is payable.

#### SEC. 471. (a)

(10) provides that the standards referred to in section 2003(d)(1)(F)<sup>1</sup> shall be applied by the State to any foster family home or child care institution receiving funds under this part or part B of this title;

#### SEC. 901.

(c)

(3)

(C) Each estimate of net receipts under this paragraph shall be based upon (i) a tax rate of 0.5 percent in the case of any calendar year for which the rate of tax under section 3301 of the Federal Unemployment Tax Act is 3.2 percent, and (ii) a tax rate of 0.7 percent in the case of any calendar year for which the rate of tax under such section 3301 is 3.4 percent.

SEC. 1128A. (a) Any person (including an organization, agency, or other entity) that presents or causes to be presented to an officer, employee, or agent of the United States, or of any department or agency thereof, or of any State agency (as defined in subsection (h)(1)), a claim (as defined in subsection (h)(2)) that the Secretary determines—

<sup>1</sup>P.L. 97-35, §2353(r), struck out "referred to in section 2003(d)(1)(F)" and substituted "in effect in the State with respect to child day care services under title XX", effective October 1, 1981.

P.L. 97-248, §160(d), amended §2353(r) to read "Section 471(a)(10) of such Act is amended to read as follows:".



(1) is for a medical or other item or service—

(A) that the person knows or has reason to know was not provided as claimed, or

(B) payment for which may not be made under the program under which such claim was made, pursuant to a determination by the Secretary under section 1128, 1160(b), 1862(d), or 1866(b)(2), or

(2) is submitted in violation of an agreement between the person and the United States or a State agency,

## PART B—PROFESSIONAL STANDARDS REVIEW

### DECLARATION OF PURPOSE

SEC. 1151. In order to promote the effective, efficient, and economical delivery of health care services of proper quality for which payment may be made (in whole or part) under title XVIII of this Act and in recognition of the interests of patients, the public, practitioners, and providers in improved health care services, it is the purpose of this part to assure, through the application of suitable procedures of professional standards review, that the services for which payment may be made under title XVIII of this Act will conform to appropriate professional standards for the provision of health care and that payment for such services will be made—

(1) only when, and to the extent, medically necessary, as determined in the exercise of reasonable limits of professional discretion; and

(2) in the case of services provided by a hospital or other health care facility on an inpatient basis, only when and for such period as such services cannot, consistent with professionally recognized health care standards, effectively be provided on an outpatient basis or more economically in an inpatient health care facility of a different type, as determined in the exercise of reasonable limits of professional discretion.

### DESIGNATION OF PROFESSIONAL STANDARDS REVIEW ORGANIZATIONS

SEC. 1152. (a) The Secretary shall (1) not later than January 1, 1974, establish throughout the United States appropriate areas with respect to which Professional Standards Review Organizations may be designated, and (2) at the earliest practicable date after designation of an area enter into an agreement with a qualified organization whereby such an organization shall be conditionally designated as the Professional Standards Review Organization for such area. If, on the basis of its performance during such period of conditional designation, the Secretary determines that such organization is capable of fulfilling, in a satisfactory manner, the obligations and requirements for a Professional Standards Review Organization under this part, he shall enter into an agreement with such organization designating it as the Professional Standards Review Organization for such area.

(b) For purposes of subsection (a), the term “qualified organization” means—

(1) when used in connection with any area—

(A) an organization (i) which is a nonprofit professional association (or a component organization thereof), (ii) which is composed of licensed doctors of medicine or osteopathy engaged in the practice of medicine or surgery in such area, and, if the organization so elects, of other health care practitioners engaged in the practice of their professions in such area who hold independent hospital admitting privileges, (iii) the membership of which includes a substantial proportion of all such physicians in such area, (iv) which is organized in a manner which makes available professional competence to review health care services of the types and kinds with respect to which Professional Standards Review Organizations have review responsibilities under this part, (v) the membership of which is voluntary and open to all doctors of medicine or osteopathy licensed to engage in the practice of medicine or surgery in such area without requirement of membership in or payment of dues to any organized medical society or association, and (vi) which does not (except as otherwise provided under section 1155(c)) restrict the eligibility of any member for service as an officer of the Professional Standards Review Organization or eligibility for and assignment to duties of such Professional Standards Review Organization, or, subject to subsection (c)(1),

(B) such other public, nonprofit private, or other agency or organization, which the Secretary determines, in accordance with criteria prescribed by him in regulations, to be of professional competence and otherwise suitable; and

(2) an organization which the Secretary, on the basis of his examination and evaluation of a formal plan which shall be developed and submitted by the association, agency, or organization in accordance with subsection (h) (as well as on the basis of other relevant data and information), finds to be willing to perform and capable of performing, in an effective, timely, and objective manner and at reasonable cost, the duties, functions, and activities of a Professional Standards Review Organization required by or pursuant to this part.

(c)(1) The Secretary shall not enter into any agreement under this part under which there is designated as the Professional Standards Review Organization for any area any organization other than an organization referred to in subsection (b)(1)(A) prior to January 1, 1978, nor after such date, unless, in such area, there is no organization referred to in subsection (b)(1)(A) which meets the conditions specified in subsection (b)(2).

(2) Whenever the Secretary shall have entered into an agreement under this part under which there is designated as the Professional Standards Review Organization for any area any organization other than an organization referred to in subsection (b)(1)(A), he shall not renew such agreements with such organization if he determines that—

(A) there is in such area an organization referred to in subsection (b)(1)(A) which (i) has not been previously designated as a Professional Standards Review Organization, and (ii) is willing to enter into an agreement under this part under which such organization would be designated as the Professional Standards Review Organization for such area;

(B) such organization meets the conditions specified in subsection (b)(2); and

(C) the designation of such organization as the Professional Standards Review Organization for such area is anticipated to result in substantial improvement in the performance in such area of the duties and functions required of such organizations under this part.

(d) Any such agreement under this part with an organization (other than an agreement established pursuant to section 1154) shall be for a term of not longer than 12 months; except that, prior to the expiration of such term such agreement may be terminated—

(1) by the organization at such time and upon such notice to the Secretary as may be prescribed in regulations (except that notice of more than 3 months may not be required); or

(2) by the Secretary upon 90 days notice to the organization, but only after the Secretary has determined that such organization is not substantially complying with or effectively carrying out the provisions of such agreement.

A termination of an agreement by the Secretary under this subsection shall not be subject to judicial review.

(e) Where the Secretary finds a Professional Standards Review Organization (whether designated on a conditional basis or otherwise) to be competent to perform review responsibilities, the review, certification, and similar activities otherwise required pursuant to provisions of title XVIII of this Act (other than this part) shall not be applicable with respect to those providers, suppliers, and practitioners being reviewed by such Professional Standards Review Organization, except to the extent specified by the Secretary. Nothing in the preceding sentence shall be construed as rendering inapplicable any provision of title XVIII of this Act wherein requirements with respect to conditions for eligibility to or payment of benefits (as distinct from reviews and certifications made with respect to determinations of the kind made pursuant to paragraphs (1) and (2) of section 1155(a)) must be satisfied.

(f)(1) In the case of agreements entered into prior to January 1, 1978, under this part under which any organization is designated as the Professional Standards Review Organization for any area, the Secretary shall, prior to entering into any such agreement with any organization for any area, inform (under regulations of the Secretary) the doctors of medicine or osteopathy who are in active practice in such area of the Secretary's intention to enter into such an agreement with such organization.

(2) If, within a reasonable period of time following the serving of such notice, more than 10 per centum of such doctors object to the Secretary's entering into such an agreement with such organization on the ground that such organization is not representative of doctors in such area, the Secretary shall conduct a poll of such doctors to determine whether or not such organization is representative of such doctors in such area. If more than 50 per centum of the doctors responding to such poll indicate that such organization is not representative of such doctors in such area the Secretary shall not enter into such an agreement with such organization.



(g)(1) In any case in which the Secretary has established, within a State, two or more appropriate areas with respect to which Professional Standards Review Organizations may be designated, he shall, prior to designating a Professional Standards Review Organization for any such area, conduct in each such area a poll in which the doctors of medicine and doctors of osteopathy engaged in active practice therein will be asked: "Do you support a change from the present local and regional Professional Standards Review Organization area designations to a single statewide area designation?" If, in each such area, more than 50 per centum of the doctors responding to such question respond in the affirmative, then the Secretary shall establish the entire State as a single Professional Standards Review Organization area.

(2) The provisions of paragraph (1) shall not be applicable with respect to the designation of Professional Standards Review Organization areas in any State, if, prior to the date of enactment of this subsection, the Secretary has entered into an agreement (on a conditional basis or otherwise) with an organization designating it as the Professional Standards Review Organization for any area in the State.

#### REVIEW PENDING DESIGNATION OF PROFESSIONAL STANDARDS REVIEW ORGANIZATION

SEC. 1153. Pending the assumption by a Professional Standards Review Organization for any area, of full review responsibility, and pending a demonstration of capacity for improved review effort with respect to matters involving the provision of health care services in such area for which payment (in whole or in part) may be made, under this Act, any review with respect to such services which has not been designated by the Secretary as the full responsibility of such organization, shall be reviewed in the manner otherwise provided for under law.

#### TRIAL PERIOD FOR PROFESSIONAL STANDARDS REVIEW ORGANIZATIONS

SEC. 1154. (a) The Secretary shall initially designate an organization as a Professional Standards Review Organization for any area on a conditional basis with a view to determining the capacity of such organization to perform the duties and functions imposed under this part on Professional Standards Review Organizations. Such designation may not be made prior to receipt from such organization and approval by the Secretary of a formal plan for the orderly assumption and implementation of the responsibilities of the Professional Standards Review Organization under this part.

(b) During any such trial period (which may not exceed 48 months except as provided in subsection (c)), the Secretary may require a Professional Standards Review Organization to perform, in addition to review of health care services provided by or in hospitals, only such of the duties and functions as he requires the organization to perform under subsection (f) and which the organization is capable of performing. The number and type of such duties shall, during the trial period, be progressively increased as the organization becomes capable of added responsibility so that, by the end of such period, such organization shall be considered a qualified organization only if the Secretary finds that it is substantially carrying out in a satisfactory manner the activities and functions required of that Professional Standards Review Organization under this part. Any of such duties and functions not performed by such organization during such period shall be performed in the manner and to the extent otherwise provided for under law.

(c) If the Secretary finds that an organization designated under subsection (a) has been unable to perform satisfactorily all of the duties and functions required under this part of that organization for reasons beyond the organization's control, he may extend such organization's trial period for an additional period not exceeding twenty-four months.

(d) Any agreement under which any organization is conditionally designated as the Professional Standards Review Organization for any area may be terminated by such organization upon 90 days notice to the Secretary or by the Secretary upon 90 days notice to such organization. A termination of an agreement by the Secretary under this subsection shall not be subject to judicial review.

[(e) Stricken.\*]

(f)(1) The Secretary shall establish a program for the evaluation of the cost-effectiveness of review of particular health care services by Professional Standards Review Organizations.

(2) Where the Secretary finds that the review of particular health care services is cost-effective or yields other significant benefits, the Secretary may require Professional Standards Review Organizations (either generally or under such conditions and circumstances as the Secretary may specify) to review such services under this part.



(3) For purposes of this subsection, the term "particular health care services" does not include health care services provided by or in hospitals or alcohol detoxification facility services.

(g)(1) The Secretary shall, not later than September 30, 1981, identify and specify those requirements imposed by the Secretary with respect to the performance of Professional Standards Review Organizations which the Secretary will use for the assessment of the performance of such Organizations under this subsection. Such requirements shall include requirements relating to the effectiveness of such Organizations in (A) monitoring the quality of patient care, (B) reducing unnecessary utilization, and (C) managing its activities efficiently.

(2) Based on such requirements, the Secretary shall assess and determine the relative performance of each of such Organizations designated, conditionally or otherwise, as of September 30, 1981.

(3) If the Secretary determines that such an Organization has a relatively ineffective or inefficient performance, the Secretary may refuse to renew an agreement with the Organization under this part, except that, in exercising the Secretary's authority under this paragraph in fiscal year 1982, the sum of the number of Organizations with respect to which agreements are not renewed under this paragraph and under any other provision of this Act in the fiscal year may not exceed 30 percent of the number of such Organizations with agreements under this part on May 1, 1981.

#### DUTIES AND FUNCTIONS OF PROFESSIONAL STANDARDS REVIEW ORGANIZATIONS

SEC. 1155. (a)(1) Notwithstanding any other provision of law, but consistent with the provisions of this part, it shall be the duty and function of each Professional Standards Review Organization for any area to assume, to the extent and at the time specified by the Secretary under section 1154(f), responsibility for the review of the professional activities in such area of physicians and other health care practitioners and institutional and noninstitutional providers of health care services (except as provided in paragraph (7)) in the provision of health care services and items for which payment may be made (in whole or in part) under title XVIII of this Act for the purpose of determining whether—

(A) such services and items are or were medically necessary;

(B) the quality of such services meets professionally recognized standards of health care; and

(C) in case such services and items are proposed to be provided in a hospital or other health care facility on an inpatient basis, such services and items could, consistent with the provision of appropriate medical care, be effectively provided on an outpatient basis or more economically in an inpatient health care facility of a different type.

Each agreement with an Organization under this part shall require the Organization, if requested by a State with a plan approved under title XIX, to enter into a contract with the State, for the performance of review functions in the case of health care services and items provided under such State plan under terms and conditions similar to those contained in the agreement between the Organization and the Secretary under this part.

(2) Each Professional Standards Review Organization shall have the authority to determine, in advance, in the case of—

(A) any elective admission to a hospital or other health care facility (including admissions occurring on weekends), and

(B) any routine diagnostic services furnished in connection with such an admission,

whether such service, if provided, or if provided by a particular health care practitioner or by a particular hospital or other health care facility, organization, or agency, would meet the criteria specified in subparagraphs (A) and (C) of paragraph (1). Each such Organization may be directed by the Secretary to exercise<sup>3</sup> such authority where the Secretary finds (consistent with section 1154(f)) that such determinations can be made on a timely basis by the Organization and appropriate procedures will be applied to assure prompt notification of such determinations to providers, physicians, practitioners, and persons on whose behalf payment may be made under title XVIII of this Act for services and items.

(3) Each Professional Standards Review Organization shall, in accordance with regulations of the Secretary, determine and publish, from time to time, the types and kinds of cases (whether by type of health care or diagnosis involved, or whether in terms of other relevant criteria relating to the provision of health care services) with respect to which such organization will, in order most effectively to carry out the purposes of this part, exercise the authority conferred upon it under paragraph (2).

<sup>3</sup>As in original. Should be "exercise".

(4) Each Professional Standards Review Organization shall be responsible for the arranging for the maintenance of and the regular review of profiles of care and services received and provided with respect to patients, utilizing to the greatest extent practicable in such patient profiles, methods of coding which will provide maximum confidentiality as to patient identity and assure objective evaluation consistent with the purposes of this part. Profiles shall also be regularly reviewed on an ongoing basis with respect to each health care practitioner and provider to determine whether the care and services ordered or rendered are consistent with the criteria specified in clauses (A), (B), and (C) of paragraph (1).

(5) Physicians assigned responsibility for the review of hospital care may be only those having active hospital staff privileges in at least one of the participating hospitals in the area served by the Professional Standards Review Organization.

(6) No physician shall be permitted to review—

(A) health care services provided to a patient if he was directly responsible for providing such services, or

(B) health care services provided in or by an institution, organization, or agency, if he or any member of his family has, directly or indirectly, a significant financial interest in such institution, organization, or agency.

For purposes of this paragraph, a physician's family includes only his spouse (other than a spouse who is legally separated from him under a decree of divorce or separate maintenance), children (including legally adopted children), grandchildren, parents, and grandparents.

[(7) Repealed.\*]

(8) Each Professional Standards Review Organization shall consult (with such frequency and in such manner as may be prescribed by the Secretary) with representatives of health care practitioners (other than physicians described in section 1861(r)(1)) and of institutional and noninstitutional providers of health care services, in relation to the Professional Standards Review Organization's responsibility for the review under paragraph (1) of the professional activities of such practitioners and providers.

(b) To the extent necessary or appropriate for the proper performance of its duties and functions, the Professional Standards Review Organization serving any area is authorized in accordance with regulations prescribed by the Secretary to—

(1) make arrangements to utilize the services of persons who are practitioners of or specialists in the various areas of medicine (including dentistry), or other types of health care, which persons shall, to the maximum extent practicable, be individuals engaged in the practice of their profession within the area served by such organization;

(2) undertake such professional inquiry either before or after, or both before and after, the provision of services with respect to which such organization has a responsibility for review under subsection (a)(1);

(3) examine the pertinent records of any practitioner or provider of health care services providing services with respect to which such organization has a responsibility for review under subsection (a)(1); and

(4) inspect the facilities in which care is rendered or services provided (which are located in such area) of any practitioner or provider.

(c) No Professional Standards Review Organization shall utilize the services of any individual who is not a duly licensed doctor of medicine or osteopathy to make final determinations in accordance with its duties and functions under this part with respect to the professional conduct of any other duly licensed doctor of medicine or osteopathy, or any act performed by any duly licensed doctor of medicine or osteopathy in the exercise of his profession.

(d) In order to familiarize physicians with the review functions and activities of Professional Standards Review Organizations and to promote acceptance of such functions and activities by physicians, patients, and other persons, each Professional Standards Review Organization, in carrying out its review responsibilities, shall (to the maximum extent consistent with the effective and timely performance of its duties and functions)—

(1) encourage all physicians practicing their profession in the area served by such Organization to participate as reviewers in the review activities of such Organizations;

(2) provide rotating physician membership of review committees on an extensive and continuing basis;

(3) assure that membership on review committees have the broadest representation feasible in terms of the various types of practice in which physicians engage in the area served by such Organization; and



(4) utilize, whenever appropriate, medical periodicals and similar publications to publicize the functions and activities of Professional Standards Review Organizations.

(e)(1) Each Professional Standards Review Organization may utilize the services of, and accept the findings of, the review committees of a hospital (including any skilled nursing facility, as defined in section 1861(j), which is also a part of such hospital) or other operating health care facility or organization (other than such a skilled nursing facility which is not part of a hospital) located in the area served by such organization, but only when and only to the extent and only for such time that such committees in such hospital or other operating health care facility or organization have demonstrated to the satisfaction of such organization their capacity effectively, efficiently, and in timely fashion to review activities in such hospital or other operating health care facility or organization (including the medical necessity of admissions, types and extent of services ordered, and lengths of stay) so as to aid in accomplishing the purposes and responsibilities described in subsection (a)(1), except where the Secretary disapproves, for good cause, such acceptance.

(2) The Secretary may prescribe regulations to carry out the provisions of this subsection.

(f)(1) An agreement entered into under this part between the Secretary and any organization under which such organization is designated as the Professional Standards Review Organization for any area shall provide that such organization will—

(A) perform such duties and functions and assume such responsibilities and comply with such other requirements as may be required by this part or under regulations of the Secretary promulgated to carry out the provisions of this part; and

(B) collect such data relevant to its functions and such information and keep and maintain such records in such form as the Secretary may require to carry out the purposes of this part and to permit access to and use of any such records as the Secretary may require for such purposes.

(2) Any such agreement with an organization under this part shall provide that the Secretary make payments to such organization equal to the amount of expenses reasonably and necessarily incurred, as determined by the Secretary, by such organization in carrying out or preparing to carry out the duties and functions required by such agreement.

(3) Any such agreement with an organization under this part may be in the form of a grant or an assistance agreement.

**[(g) Repealed.]**

(h) If the Secretary has designated an organization (other than under section 1154) as a Professional Standards Review Organization, but that organization has not assumed responsibility for the review of particular activities in its area included in subsection (a)(1), the Secretary may designate another qualified Professional Standards Review Organization (in reasonable proximity to the providers and practitioners whose services are to be reviewed) to assume the responsibility for the review of some or all of those particular activities.

**NORMS OF HEALTH CARE SERVICES FOR VARIOUS ILLNESSES OR HEALTH CONDITIONS**

SEC. 1156. (a) Each Professional Standards Review Organization shall apply professionally developed norms of care, diagnosis, and treatment based upon typical patterns of practice in its regions (including typical lengths-of-stay for institutional care by age and diagnosis) as principal points of evaluation and review. The National Professional Standards Review Council and the Secretary shall provide such technical assistance to the organization as will be helpful in utilizing and applying such norms of care, diagnosis, and treatment. Where the actual norms of care, diagnosis, and treatment in a Professional Standards Review Organization area are significantly different from professionally developed regional norms of care, diagnosis, and treatment approved for comparable conditions, the Professional Standards Review Organization concerned shall be so informed, and in the event that appropriate consultation and discussion indicate reasonable basis for usage of other norms in the area concerned, the Professional Standards Review Organization may apply such norms in such area as are approved by the National Professional Standards Review Council.

(b) Such norms with respect to treatment for particular illnesses or health conditions shall include (in accordance with regulations of the Secretary)—

(1) the types and extent of the health care services which, taking into account differing, but acceptable, modes of treatment and methods of organizing and delivering care are considered within the range of appropriate diagnosis and



treatment of such illness or health condition, consistent with professionally recognized and accepted patterns of care;

(2) the type of health care facility which is considered, consistent with such standards, to be the type in which health care services which are medically appropriate for such illness or condition can most economically be provided.

(c)(1) The National Professional Standards Review Council shall provide for the preparation and distribution, to each Professional Standards Review Organization and to each other agency or person performing review functions with respect to the provision of health care services under this Act, of appropriate materials indicating the regional norms to be utilized pursuant to this part. Such data concerning norms shall be reviewed and revised from time to time. The approval of the National Professional Standards Review Council of norms of care, diagnosis, and treatment shall be based on its analysis of appropriate and adequate data.

(2) Each review organization, agency, or person referred to in paragraph (1) shall utilize the norms developed under this section as a principal point of evaluation and review for determining, with respect to any health care services which have been or are proposed to be provided, whether such care and services are consistent with the criteria specified in section 1155(a)(1).

(d)(1) Each Professional Standards Review Organization shall—

(A) in accordance with regulations of the Secretary, specify the appropriate points in time after the admission of a patient for inpatient care in a health care institution, at which the physician attending such patient shall execute a certification stating that further inpatient care in such institution will be medically necessary effectively to meet the health care needs of such patient; and

(B) require that there be included in any such certification with respect to any patient such information as may be necessary to enable such organization properly to evaluate the medical necessity of the further institutional health care recommended by the physician executing such certification.

(2) The points in time at which any such certification will be required (usually, not later than the 50th percentile of lengths-of-stay for patients in similar age groups with similar diagnoses) shall be consistent with and based on professionally developed norms of care and treatment and data developed with respect to length of stay in health care institutions of patients having various illnesses, injuries, or health conditions, and requiring various types of health care services or procedures.

#### SUBMISSION OF REPORTS BY PROFESSIONAL STANDARDS REVIEW ORGANIZATIONS

SEC. 1157. If, in discharging its duties and functions under this part, any Professional Standards Review Organization determines that any health care practitioner or any hospital, or other health care facility, agency, or organization has violated any of the obligations imposed by section 1160, such organization shall report the matter to the Statewide Professional Standards Review Council for the State in which such organization is located together with the recommendations of such Organization as to the action which should be taken with respect to the matter. Any Statewide Professional Standards Review Council receiving any such report and recommendation shall review the same and promptly transmit such report and recommendation to the Secretary together with any additional comments or recommendations thereon as it deems appropriate.

#### REQUIREMENT OF REVIEW APPROVAL AS CONDITION OF PAYMENT OF CLAIMS

SEC. 1158. (a) Except as provided for in subsection (d) of this section and in sections 1159, 1861(v)(1)(G), and 1902(h), no Federal funds appropriated under title XVIII for the provision of health care services or items shall be used (directly or indirectly) for the payment, under such title, of any claim for the provision of such services or items, unless the Secretary, pursuant to regulation determines that the claimant is without fault if—

(1) the provision of such services or items is subject to review under this part by any Professional Standards Review Organization, or other agency; and

(2) such organization or other agency has, in the proper exercise of its duties and functions under or consistent with the purposes of this part, disapproved of the services or items giving rise to such claim, and has notified the practitioner or provider who provided or proposed to provide such services or items and the individual who would receive or was proposed to receive such services or items of its disapproval of the provision of such services or items.

(b) Whenever any Professional Standards Review Organization, in the discharge of its duties and functions as specified by or pursuant to this part, disapproves of any health care services or items furnished or to be furnished by any practitioner or

provider, such organization shall, after notifying the practitioner, provider, or other organization or agency of its disapproval in accordance with subsection (a), promptly notify the agency or organization having responsibility for acting upon claims for payment for or on account of such services or items.

(c) Where a Professional Standards Review Organization (whether designated on a conditional basis or otherwise) has been found competent by the Secretary to assume review responsibility with respect to specified types of health care services or specified providers or practitioners of such services and is performing such reviews, determinations made pursuant to paragraphs (1) and (2) of section 1155(a) in connection with such reviews shall constitute the conclusive determination on those issues (subject to section 1159) for purposes of payment under title XVIII, and no reviews with respect to those determinations shall be conducted, for purposes of payment, by agencies and organizations which are parties to agreements entered into by the Secretary pursuant to section 1816, carriers which are parties to contracts entered into by the Secretary pursuant to section 1842.

(d) In any case in which a Professional Standards Review Organization disapproves (under subsection (a)) of inpatient hospital services or posthospital extended care services, payment may be made for such services furnished before the second day after the day on which the provider received notice of such disapproval, or, if such organization determines that more time is required in order to arrange post discharge care, payment may be made for such services furnished before the fourth day after the day on which the provider received notice of such disapproval. In the case of disapproval of inpatient hospital services where payment for inpatient services is continued under section 1861(v)(1)(G), the previous sentence shall not apply with respect to such disapproval.

#### HEARINGS AND REVIEW BY SECRETARY

SEC. 1159. (a) Any beneficiary or recipient who is entitled to benefits under title XVIII or a provider or practitioner who is dissatisfied with a determination with respect to a claim made by a Professional Standards Review Organization in carrying out its responsibilities for the review of professional activities in accordance with paragraphs (1) and (2) of section 1155(a) shall, after being notified of such determination, be entitled to a reconsideration thereof by the Professional Standards Review Organization and, where the Professional Standards Review Organization reaffirms such determination in a State which has established a Statewide Professional Standards Review Council, and where the matter in controversy is \$100 or more, such determination shall be reviewed by professional members of such Council and, if the Council so determined, revised.

(b) Where the determination of the Statewide Professional Standards Review Council is adverse to the beneficiary or recipient (or, in the absence of such Council in a State and where the matter in controversy is \$100 or more), such beneficiary or recipient shall be entitled to a hearing thereon by the Secretary to the same extent as is provided in section 205(b), and, where the amount in controversy is \$1,000 or more, to judicial review of the Secretary's final decision after such hearing as is provided in section 205(g). The Secretary will render a decision only after appropriate professional consultation on the matter.

(c) Any review or appeals provided under this section shall be in lieu of any review, hearing, or appeal under this Act with respect to the same issue.

#### OBLIGATIONS OF HEALTH CARE PRACTITIONERS AND PROVIDERS OF HEALTH CARE SERVICES; SANCTIONS AND PENALTIES; HEARINGS AND REVIEW

SEC. 1160. (a)(1) It shall be the obligation of any health care practitioner and any other person (including a hospital or other health care facility, organization, or agency) who provides health care services for which payment may be made (in whole or in part) under title XVIII (or under a State plan approved under title XIX, where the services furnished by the person are subject to review under a contract between the State and an Organization under section 1155(a)), to assure that services or items ordered or provided by such practitioner or person to beneficiaries and recipients under such title (or such State plan)—

(A) will be provided only when, and to the extent, medically necessary; and

(B) will be of a quality which meets professionally recognized standards of health care; and

(C) will be supported by evidence of such medical necessity and quality in such form and fashion and at such time as may reasonably be required by the Professional Standards Review Organization in the exercise of its duties and responsibilities;



and it shall be the obligation of any health care practitioner in ordering, authorizing, directing, or arranging for the provision by any other person (including a hospital or other health care facility, organization, or agency), of health care services for any patient of such practitioner, to exercise his professional responsibility with a view to assuring (to the extent of his influence or control over such patient, such person, or the provision of such services) that such services or items will be provided—

(D) only when, and to the extent, medically necessary; and

(E) will be of a quality which meets professionally recognized standards of health care.

(2) Each health care practitioner, and each hospital or other provider of health care services, shall have an obligation, within reasonable limits of professional discretion, not to take any action, in the exercise of his profession (in the case of any health care practitioner), or in the conduct of its business (in the case of any hospital or other such provider), which would authorize any individual to be admitted as an inpatient in or to continue as an inpatient in any hospital or other health care facility unless—

(A) inpatient care is determined by such practitioner and by such hospital or other provider, consistent with professionally recognized health care standards, to be medically necessary for the proper care of such individual; and

(B)(i) the inpatient care required by such individual cannot, consistent with such standards, be provided more economically in a health care facility of a different type; or

(ii) (in the case of a patient who requires care which can, consistent with such standards, be provided more economically in a health care facility of a different type) there is, in the area in which such individual is located, no such facility or no such facility which is available to provide care to such individual at the time when care is needed by him.

(b)(1) If after reasonable notice and opportunity for discussion with the health care practitioner or hospital, or other health care facility, agency, or organization concerned, any Professional Standards Review Organization submits a report and recommendations to the Secretary pursuant to section 1157 (which report and recommendations shall be submitted through the Statewide Professional Standards Review Council, if such Council has been established, which shall promptly transmit such report and recommendations together with any additional comments and recommendations thereon as it deems appropriate) and if the Secretary determines that such health care practitioner or hospital, or other health care facility, agency, or organization, in providing health care services over which such organization has review responsibility and for which payment (in whole or in part) may be made under title XVIII has—

(A) by failing, in a substantial number of cases, substantially to comply with any obligation imposed on him under subsection (a), or

(B) by grossly and flagrantly violating any such obligation in one or more instances, demonstrated an unwillingness or a lack of ability substantially to comply with such obligations, he (in addition to any other sanction provided under law) may exclude (permanently or for such period as the Secretary may prescribe) such health care practitioner or hospital, or other health care facility, agency, or organization from eligibility to provide such services on a reimbursable basis.

(2) A determination made by the Secretary under this subsection shall be effective at such time and upon such reasonable notice to the public and to the person furnishing the services involved as may be specified in regulations. Such determination shall be effective with respect to services furnished to an individual on or after the effective date of such determination (except that in the case of institutional health care services such determination shall be effective in the manner provided in title XVIII with respect to terminations of provider agreements), and shall remain in effect until the Secretary finds and gives reasonable notice to the public that the basis for such determination has been removed and that there is reasonable assurance that it will not recur.

(3) In lieu of the sanction authorized by paragraph (1), the Secretary may require that (as a condition to the continued eligibility of such practitioner or provider to provide such health care services on a reimbursable basis) such practitioner or provider pay to the United States, in case such acts or conduct involved the provision or ordering by such practitioner or provider of health care services which were medically improper or unnecessary, an amount not in excess of the actual or estimated cost of the medically improper or unnecessary services so provided, or (if less) \$5,000. Such amount may be deducted from any sums owing by the United States (or any instrumentality thereof) to the person from whom such amount is claimed.

(4) Any person furnishing services described in paragraph (1) who is dissatisfied with a determination made by the Secretary under this subsection shall be entitled to



reasonable notice and opportunity for a hearing thereon by the Secretary to the same extent as is provided in section 205(b), and to judicial review of the Secretary's final decision after such hearing as is provided in section 205(g).

(c) It shall be the duty of each Professional Standards Review Organization and each Statewide Professional Standards Review Council to use such authority or influence it may possess as a professional organization, and to enlist the support of any other professional or governmental organization having influence or authority over health care practitioners and any other person (including a hospital or other health care facility, organization, or agency) providing health care services in the area served by such review organization, in assuring that each practitioner or provider (referred to in subsection (a)) providing health care services in such area shall comply with all obligations imposed on him under subsection (a).

#### NOTICE TO PRACTITIONER OR PROVIDER

SEC. 1161. Whenever any Professional Standards Review Organization takes any action or makes any determination—

(a) which denies any request, by a health care practitioner or other provider of health care services, for approval of a health care service or item proposed to be ordered or provided by such practitioner or provider; or

(b) that any such practitioner or provider has violated any obligation imposed on such practitioner or provider under section 1160, such organization shall, immediately after taking such action or making such determination, give notice to such practitioner or provider of such determination and the basis therefor, and shall provide him with appropriate opportunity for discussion and review of the matter.

#### STATEWIDE PROFESSIONAL STANDARDS REVIEW COUNCILS; ADVISORY GROUPS TO SUCH COUNCILS

SEC. 1162. (a) In any State in which there are located three or more Professional Standards Review Organizations, the Secretary shall establish a Statewide Professional Standards Review Council.

(b) The membership of any such Council for any State shall be appointed by the Secretary and shall consist of—

(1) one representative from and designated by each Professional Standards Review Organization in the State;

(2) four physicians, two of whom may be designated by the State medical society and two of whom may be designated by the State hospital association of such State to serve as members on such Council; and

(3) four persons knowledgeable in health care from such State whom the Secretary shall have selected as representatives of the public in such State (at least two of whom shall have been recommended for membership on the Council by the Governor of such State).

(c) It shall be the duty and function of the Statewide Professional Standards Review Council for any State, in accordance with regulations of the Secretary, (1) to coordinate the activities of, and disseminate information and data among the various Professional Standards Review Organizations within such State including assisting the Secretary in development of uniform data gathering procedures and operating procedures applicable to the several areas in a State (including, where appropriate, common data processing operations serving several or all areas) to assure efficient operation and objective evaluation of comparative performance of the several areas and, (2) to assist the Secretary in evaluating the performance of each Professional Standards Review Organization, and (3) where the Secretary finds it necessary to replace a Professional Standards Review Organization, to assist him in developing and arranging for a qualified replacement Professional Standards Review Organization.

(d) The Secretary is authorized to enter into an agreement with any such Council under which the Secretary shall make payments to such Council equal to the amount of expenses reasonably and necessarily incurred, as determined by the Secretary, by such Council in carrying out the duties and functions provided in this section.

(e)(1) The Statewide Professional Standards Review Council for any State shall be advised and assisted in carrying out its functions by an advisory group (of not less than seven nor more than eleven members) which shall be made up of representatives (including at least one registered professional nurse and at least one doctor of dental surgery or of dental medicine) of health care practitioners (other than physicians) and hospitals and other health care facilities which provide within the State health care services for which payment (in whole or in part) may be made under title XVIII.

(2) The Secretary shall by regulations provide the manner in which members of such advisory group shall be selected by the Statewide Professional Standards Review Council.

(3) The expenses reasonably and necessarily incurred, as determined by the Secretary, by such group in carrying out its<sup>6</sup> duties and functions under this subsection shall be considered to be expenses necessarily incurred by the Statewide Professional Standards Review Council served by such group.

## NATIONAL PROFESSIONAL STANDARDS REVIEW COUNCIL

SEC. 1163. (a)(1) There shall be established a National Professional Standards Review Council (hereinafter in this section referred to as the "Council") which shall consist of eleven physicians, one doctor of dental surgery or of dental medicine, one registered professional nurse, and one other health practitioner (other than a physician as defined in section 1861(r)(1)), not otherwise in the employ of the United States, appointed by the Secretary without regard to the provisions of title 5, United States Code, governing appointments in the competitive service.

(2) Members of the Council shall be appointed for a term of three years, except that the Secretary may provide, in the case of any terms scheduled to expire after January 1, 1978, for such shorter terms as will ensure that (on a continuing basis) the terms of no more than five members expire in any year. Members of the Council shall be eligible for reappointment.

(3) The Secretary shall from time to time designate one of the physician members of the Council to serve as Chairman thereof.

(b) Physician members of the Council shall consist of physicians of recognized standing and distinction in the appraisal of medical practice. A majority of such members shall be physicians who have been recommended by<sup>7</sup> the Secretary to serve on the Council by national organizations recognized by the Secretary as representing practicing physicians. The membership of the Council shall include physicians who have been recommended for membership on the Council by consumer groups and other health care interests.

(c) The Council is authorized to utilize, and the Secretary shall make available, or arrange for, such technical and professional consultative assistance as may be required to carry out its functions, and the Secretary shall, in addition, make available to the Council such secretarial, clerical and other assistance and such pertinent data prepared by, for, or otherwise available to, the Department of Health, Education, and Welfare as the Council may require to carry out its functions.

(d) Members of the Council, while serving on business of the Council, shall be entitled to receive compensation at a rate fixed by the Secretary (but not in excess of the daily rate paid under GS-18 of the General Schedule under section 5332 of title 5, United States Code), including traveltime; and while so serving away from their homes or regular places of business, they may be allowed travel expenses, including per diem in lieu of subsistence, as authorized by section 5703 of title 5, United States Code, for persons in Government service employed intermittently.

(e) It shall be the duty of the Council to—

(1) advise the Secretary in the administration of this part;

(2) provide for the development and distribution, among Statewide Professional Standards Review Councils and Professional Standards Review Organizations of information and data which will assist such review councils and organizations in carrying out their duties and functions;

(3) review the operations of Statewide Professional Standards Review Councils and Professional Standards Review Organizations with a view to determining the effectiveness and comparative performance of such review councils and organizations in carrying out the purposes of this part; and

(4) make or arrange for the making of studies and investigations with a view to developing and recommending to the Secretary and to the Congress measures designed more effectively to accomplish the purposes and objectives of this part.

**[SEC. 1164. Repealed.<sup>8</sup>]**

<sup>6</sup>As in original. Should be "its".

<sup>7</sup>As in original. Probably should be "to".

<sup>8</sup>P.L. 97-35, §2113(i); 95 Stat. 795.



## CORRELATION OF FUNCTIONS BETWEEN PROFESSIONAL STANDARDS REVIEW ORGANIZATIONS AND ADMINISTRATIVE INSTRUMENTALITIES

SEC. 1165. The Secretary shall by regulations provide for such correlation of activities, such interchange of data and information, and such other cooperation consistent with economical, efficient, coordinated, and comprehensive implementation of this part (including, but not limited to, usage of existing mechanical and other data-gathering capacity) between and among—

(a)(1) agencies and organizations which are parties to agreements entered into pursuant to section 1816, (2) carriers which are parties to contracts entered into pursuant to section 1842, and (3) any other public or private agency (other than a Professional Standards Review Organization) having review or control functions, or proved relevant data-gathering procedures and experience, and

(b) Professional Standards Review Organizations, as may be necessary or appropriate for the effective administration of title XVIII, or State plans approved under this Act.

## PROHIBITION AGAINST DISCLOSURE OF INFORMATION

SEC. 1166. (a) Any data or information acquired by any Professional Standards Review Organization, in the exercise of its duties and functions, shall be held in confidence and shall not be disclosed to any person except (1) to the extent that may be necessary to carry out the purposes of this part, (2) in such cases and under such circumstances as the Secretary shall by regulations provide to assure adequate protection of the rights and interests of patients, health care practitioners, or providers of health care, or (3) in accordance with subsection (b).

(b) A Professional Standards Review Organization shall provide, in accordance with procedures established by the Secretary, data and information—

(1) to assist Federal and State agencies recognized by the Secretary as having responsibility for identifying and investigating cases or patterns of fraud or abuse, which data and information shall be provided by such organization to such agencies at the request of such agencies at the discretion of such Organization on the basis of its findings with respect to evidence of fraud or abuse; and

(2) to assist the Secretary, and such Federal and State agencies recognized by the Secretary as having health planning or related responsibilities under Federal or State law (including health systems agencies and State health planning and development agencies), in carrying out appropriate health care planning and related activities, which data and information shall be provided in such format and manner as may be prescribed by the Secretary or agreed upon by the responsible Federal and State agencies and such Organization, and shall be in the form of aggregate statistical data (without identifying any individual) on a geographic, institutional, or other basis reflecting the volume and frequency of services furnished, as well as the demographic characteristics of the population subject to review by such Organization.

The penalty provided in subsection (c) shall not apply to the disclosure of any data and information received under this subsection, except that such penalty shall apply to the disclosure (by the agency receiving such data and information) of any such data and information described in paragraph (1) unless such disclosure is made in a judicial, administrative, or other formal legal proceeding resulting from an investigation conducted by the agency receiving the data and information.

(c) It shall be unlawful for any person to disclose any such information other than for such purposes, and any person violating the provisions of this section shall, upon conviction, be fined not more than \$1,000, and imprisoned for not more than six months, or both, together with the costs of prosecution.

(d) No patient record in the possession of a Professional Standards Review Organization, a Statewide Professional Standards Review Council, or the National Professional Standards Review Council shall be subject to subpoena or discovery proceedings in a civil action.

## LIMITATION ON LIABILITY FOR PERSONS PROVIDING INFORMATION, AND FOR MEMBERS AND EMPLOYEES OF PROFESSIONAL STANDARDS REVIEW ORGANIZATIONS AND STATEWIDE PROFESSIONAL STANDARDS REVIEW COUNCILS, AND FOR HEALTH CARE PRACTITIONERS AND PROVIDERS

SEC. 1167. (a) Notwithstanding any other provision of law, no person providing information to any Professional Standards Review Organization or to any Statewide Professional Standards Review Council shall be held, by reason of having provided such information, to have violated any criminal law, or to be civilly liable under any law, of the United States or of any State (or political subdivision thereof) unless—

(1) such information is unrelated to the performance of the duties and functions of such Organization or such Council, or



(2) such information is false and the person providing such information knew, or had reason to believe, that such information was false.

(b)(1) No individual who, as a member or employee of any Professional Standards Review Organization or of any Statewide Professional Standards Review Council or who furnishes professional counsel or services to such organization or council, shall be held by reason of the performance by him of any duty, function, or activity authorized or required of Professional Standards Review Organizations or of Statewide Professional Standards Review Councils under this part, to have violated any criminal law, or to be civilly liable under any law, of the United States or of any State (or political subdivision thereof) provided he has exercised due care.

(2) The provisions of paragraph (1) shall not apply with respect to any action taken by any individual if such individual, in taking such action, was motivated by malice toward any person affected by such action.

(c) No doctor of medicine or osteopathy and no provider (including directors, trustees, employees, or officials thereof) of health care services shall be civilly liable to any person under any law of the United States or of any State (or political subdivision thereof) on account of any action taken by him in compliance with or reliance upon professionally developed norms of care and treatment applied by a Professional Standards Review Organization (which has been designated in accordance with section 1152(b)(1)(A)) operating in the area where such doctor of medicine or osteopathy or provider took such action but only if—

(1) he takes such action (in the case of a health care practitioner) in the exercise of his profession as a doctor of medicine or osteopathy (or in the case of a provider of health care services) in the exercise of his functions as a provider of health care services, and

(2) he exercised due care in all professional conduct taken or directed by him and reasonably related to, and resulting from, the actions taken in compliance with or reliance upon such professionally accepted norms of care and treatment.

(d) The Secretary shall make payment to a Professional Standards Review Organization, whether conditionally designated or qualified, or to any member or employee thereof, or to any person who furnishes legal counsel or services to such organization, in an amount equal to the reasonable amount of the expenses incurred, as determined by the Secretary, in connection with the defense of any suit, action, or proceeding brought against such organization, member, or employee related to the performance of any duty or function of such organization, member, or employee (as described in section 1155).

#### AUTHORIZATION FOR USE OF CERTAIN FUNDS TO ADMINISTER THE PROVISIONS OF THIS PART

SEC. 1168. Expenses incurred in the administration of this part shall be payable from—

(1) funds in the Federal Hospital Insurance Trust Fund; and

(2) funds in the Federal Supplementary Medical Insurance Trust Fund;

in such amounts from each of the sources of funds (referred to in paragraphs (1) and (2) as the Secretary shall deem to be fair and equitable after taking into consideration the costs attributable to the administration of this part with respect to each of such plans and programs. The Secretary shall make such transfers of moneys between such funds as may be appropriate to settle accounts between them. The Secretary shall make payments to Professional Standards Review Organizations (whether designated on a conditional basis or otherwise) from funds described in the first sentence of this section for expenses incurred in the performance of duties by such Organizations<sup>a</sup>.

#### TECHNICAL ASSISTANCE TO ORGANIZATIONS DESIRING TO BE DESIGNATED AS PROFESSIONAL STANDARDS REVIEW ORGANIZATIONS

SEC. 1169. The Secretary is authorized to provide all necessary technical and other assistance (including the preparation of prototype plans of organization and operation) to organizations described in section 1152(b)(1) which—

(a) express a desire to be designated as a Professional Standards Review Organization; and

(b) the Secretary determines have a potential for meeting the requirements of a Professional Standards Review Organization;

to assist such organizations in developing a proper plan to be submitted to the Secretary and otherwise in preparing to meet the requirements of this part for designation as a Professional Standards Review Organization.

<sup>a</sup>As in original. Should be "Organizations".

## EXEMPTIONS OF CHRISTIAN SCIENCE SANATORIUMS

SEC. 1170. The provisions of this part shall not apply with respect to a Christian Science sanatorium operated, or listed and certified, by the First Church of Christ, Scientist, Boston, Massachusetts.

[SEC. 1171. Repealed.<sup>10</sup>]

## ANNUAL REPORTS

SEC. 1172. The Secretary shall submit to the Congress not later than April 1, 1978, and not later than April 1 of each year thereafter, a full and complete report on the administration, impact, and cost of the program under this part during the preceding fiscal year, including data and information on—

(1) the number, status (conditional or otherwise), and service areas of, and review methodologies employed by, all Professional Standards Review Organizations participating in the program;

(2) the number of health care institutions and practitioners whose services are subject to review by Professional Standards Review Organizations, and the number of beneficiaries and recipients who received services subject to such review during such year;

(3) the imposition of penalties and sanctions under this title for violations of law and for failure to comply with the obligations imposed by this part;

(4) the total costs incurred under titles XI and XVIII of this Act in the implementation and operation of all procedures required by such titles for the review of services to determine their medical necessity, appropriateness of use, and quality;

(5) changes in utilization rates and patterns, and changes in medical procedures and practices, attributable to the activities of Professional Standards Review Organizations;

(6) the results of program evaluation activities, including the operation of data collection systems and the status of Professional Standards Review Organization data policy and implementation;

(7) the extent to which Professional Standards Review Organizations are performing reviews of services for other governmental or private health insurance programs; and

(8) recommendations for legislative changes.

MEDICAL OFFICERS IN AMERICAN SAMOA, THE NORTHERN MARIANA ISLANDS, AND THE TRUST TERRITORY OF THE PACIFIC ISLANDS TO BE INCLUDED IN THE PROFESSIONAL STANDARDS REVIEW PROGRAM

SEC. 1173. For purposes of applying this part (except section 1155(c)) to American Samoa, the Northern Mariana Islands, and the Trust Territory of the Pacific Islands, individuals licensed to practice medicine in those places shall be considered to be physicians and doctors of medicine.

SEC. 1611.

(c)

(2) The amount of such benefit for the month in which application for such benefits is filed or, if the Secretary so determines, for such month and the following month, and for any month following a month of ineligibility for such benefits (or, if the Secretary so determines, such month and the following month) shall be determined on the basis of the individual's (and eligible spouse's, if any) income and other relevant circumstances in such month.

(3) For purposes of this subsection, an application shall be effective as of the first day of the month in which it is filed.

## COST-OF-LIVING ADJUSTMENTS IN BENEFITS

SEC. 1617. Whenever benefit amounts under title II are increased by any percentage effective with any month as a result of determination made under section 215(i), each of the dollar amounts in effect for such month under subsections (a)(1)(A), (a)(2)(A), (b)(1), (b)(2) of section 1611, and subsection (a)(1)(A) of section 211 of Public Law 93-66, as specified in such subsections or as previously increased under this section, shall be increased by the same percentage (and rounded, when not a multiple of \$1.20, to the next higher multiple of \$1.20), effective with respect to benefits for months after such month; and such dollar amounts as so increased shall be published in the Federal Register together with, and at the same time as, the material required by section 215(i)(2)(D) to be published therein by reason of such determination.

<sup>10</sup>P.L. 97-35, §2113(k); 95 Stat. 795.



## SEC. 1833. (a)

(1) (B) with respect to expenses incurred for radiological or pathological services for which payment may be made under this part, furnished to an inpatient of a hospital by a physician in the field of radiology or pathology who has in effect an agreement with the Secretary by which the physician agrees to accept an assignment (as provided for in section 1842(b)(3)(B)(ii)) for all physicians' services furnished by him to hospital inpatients enrolled under this part, the amounts paid shall be equal to 100 percent of the reasonable charges for such services, (H) with respect to items and services described in section 1861(s)(10), the amounts paid shall be 100 percent of the reasonable charges for such items and services,

(b)(1) such total amount shall not include expenses incurred (A) for radiological or pathological services furnished to such individual as an inpatient of a hospital by a physician in the field of radiology or pathology who has in effect an agreement with the Secretary by which the physician agrees to accept an assignment (as provided for in section 1842(b)(3)(B)(ii)) for all physicians' services furnished by him to hospital inpatients enrolled under this part, or (B) for items and services described in section 1861(s)(10),

## SEC. 1861.

## (v)(1)

(E) ; except that the foregoing provisions of this subparagraph shall not apply to any skilled nursing facility in such State if—

(i) such facility is a distinct part of or directly operated by a hospital, or

(ii) such facility operates in a close, formal satellite relationship (as defined in regulations of the Secretary) with a participating hospital or hospitals.

Notwithstanding the previous provisions of this paragraph in the case of a facility specified in clause (ii) of this subparagraph, the reasonable cost of any services furnished by such facility as determined by the Secretary under this subsection shall not exceed 150 percent of the costs determined by the application of this subparagraph (without regard to such clause (ii)).

## (H)

(iii) (II) which determines the amount payable by the home health agency on the basis of a percentage of the agency's reimbursement or claim for reimbursement for services furnished by the agency

(J) Such regulations shall provide that an inpatient routine nursing salary cost differential shall be allowable as a reimbursable cost of hospitals, at a rate not to exceed 5 percent, to be applied under the same methodology used for the nursing salary cost differential for the month of April 1981.

(L)(i) The Secretary, in determining the amount of the payments that may be made under this title with respect to routine operating costs for the provision of general inpatient hospital services, may not recognize as reasonable (in the efficient delivery of health services) routine operating costs for the provision of general inpatient hospital services by a hospital to the extent these costs exceed 108 percent of the mean of such routine operating costs per diem for hospitals, or, in the judgment of the Secretary, such lower percentage or such comparable or lower limit as the Secretary may determine. The Secretary may provide for such exemptions and exceptions to such limitation as he deems appropriate.

## SEC. 1862. (a)

(1) which are not reasonable and necessary for the diagnosis or treatment of illness or injury or to improve the functioning of a malformed body member, or, in the case of items and services described in section 1861(s)(10), which are not reasonable and necessary for the prevention of illness;

## PAYMENTS TO HEALTH MAINTENANCE ORGANIZATIONS

SEC. 1876. (a)(1) In lieu of amounts which would otherwise be payable pursuant to sections 1814(b) and 1833(a), the Secretary is authorized to determine, by actuarial methods, as provided in this section, but only with respect to a health maintenance organization with which he has entered into a contract under subsection (i), a per capita rate of payment—

(A) for services provided under parts A and B for individuals enrolled with such organization pursuant to subsection (e) who are entitled to hospital insurance benefits under part A and enrolled for medical insurance benefits under part B, and

(B) for services provided under part B for individuals enrolled with such organization pursuant to subsection (e) who are not entitled to benefits under part A but who are enrolled for benefits under part B.



(2) An interim per capita rate of payment for each health maintenance organization shall be determined annually by the Secretary on the basis of each organization's annual operating budget and enrollment forecast which shall be submitted (in such form and in such detail as the Secretary may prescribe) at least 90 days before the beginning of each contract year. Each interim rate shall be equal to the estimated per capita cost (based upon types and components of expenses otherwise reimbursable under this title) of providing services defined in paragraph (3)(A)(iii). In the event that the data requested to be furnished by a health maintenance organization are not furnished timely, such reduction in interim payments may be made by the Secretary as is appropriate, until such time as a reasonable estimate of per capita costs can be made. Each month, the Secretary shall pay each such organization its interim per capita rate, in advance, for each individual enrolled with it pursuant to subsection (e). Each such organization shall submit interim estimated cost reports and enrollment data on a quarterly basis in such form and manner satisfactory to the Secretary, and the Secretary shall adjust each interim per capita rate to the extent necessary to maintain interim payments at the level of current costs. Interim payments made under this paragraph shall be subject to retroactive adjustment at the end of each contract year as provided in paragraph (3).

(3)(A) With respect to any health maintenance organization which has entered into a risk sharing contract with the Secretary pursuant to subsection (i)(2)(A), payments made to such organization shall be subject to the following adjustments at the end of each contract year:

(i) if the Secretary determines that the per capita incurred cost of any such organization in any contract year for providing services described in paragraph (1) is less than the adjusted average per capita incurred cost (as defined herein) of providing such services, the resulting difference (hereinafter referred to as "savings") shall be apportioned following the close of a contract year for such year between such organization and the Federal Hospital Insurance Trust Fund and the Federal Supplementary Medical Insurance Trust Fund (hereinafter collectively referred to as the "Medicare Trust Funds") as follows:

(I) savings up to 20 percent of the adjusted average per capita cost shall be apportioned equally between such organization and the Medicare Trust Funds;

(II) savings in excess of 20 percent of the adjusted average per capita cost shall be apportioned entirely to such Trust Funds;

(ii) if the Secretary determines that the per capita incurred cost of any such organization in any contract year for providing services described in paragraph (1) is greater than the adjusted average per capita incurred cost of providing such services, the resulting difference (hereinafter referred to as "losses"), shall be absorbed by such organization, and shall be carried forward and offset from savings realized in later years;

(iii) determination of any amounts payable at the close of the contract year to such organization or to the Trust Funds shall be made as follows:

(I) within 90 days after close of a contract year, interim determination of the amount of estimated savings and apportionment thereof shall be made, actuarially, on the basis of interim reports of costs incurred by an organization, and adjusted average per capita costs incurred (as defined herein), and other evidence acceptable to the Secretary and one-half of any amounts deemed payable to such organization or the Trust Funds shall be paid by such organization or the Secretary as appropriate;

(II) final settlement and payment by the Secretary or organization, as appropriate, of any additional amounts due on basis of such final settlement will be made where adequate data for actuarial computation are available, in timely fashion following submission by such organization of reports specified in subparagraph (C) of this paragraph; and

(III) where such final settlement is reached more than 90 days following submission of reports specified in subparagraph (C) of this paragraph, any amount payable by the Secretary or organization shall be increased by an interest amount, accruing from the 91st day following submission of such report, equal to the average rate of interest payable on Federal obligations if issued on such 91st day for purchase by the Trust Funds.<sup>11</sup>

(iv) The<sup>12</sup> term "adjusted average per capita cost" means the average per capita amount that the Secretary determines (on the basis of actual experience, or retrospective actuarial equivalent based upon an adequate sample and other information and data, in the geographic area served by a health maintenance

<sup>11</sup>As in public law. Punctuation questionable.

<sup>12</sup>As in public law. Capitalization questionable.

organization or in a similar area, with appropriate adjustment to assure actuarial equivalence, including adjustments relating to age distribution, sex, race, institutional status, disability status, and any other relevant factors) would be payable in any contract year for services covered under this title and types of expenses otherwise reimbursable under this title (including administrative costs incurred by organizations described in sections 1816 and 1842) if such services were to be furnished by other than such health maintenance organization.

(B) With respect to any health maintenance organization which has entered into a reasonable cost reimbursement contract with the Secretary pursuant to subsection (i)(2)(B), payments made to such organization shall be subject to suitable retroactive corrective adjustments at the end of each contract year so as to assure that such organization is paid for the reasonable cost actually incurred (excluding therefrom any part of incurred cost found to be unnecessary in the efficient delivery of health services) for the types of expenses otherwise reimbursable under this title for providing services covered under this title to individuals described in paragraph (1).

(C) Any contract with a health maintenance organization under this title shall provide that the Secretary shall require, at such time following the expiration of each accounting period of a health maintenance organization (and in such form and in such detail) as he may prescribe:

(i) that such health maintenance organization report to him in an independently certified financial statement its per capita incurred cost based on the types and components of expenses otherwise reimbursable under this title for providing services described in paragraph (1), including therein, in accordance with accounting procedures prescribed by the Secretary, its methods of allocating costs between individuals enrolled under this section and other individuals enrolled with such organization;

(ii) that failure to report such information as may be required may be deemed to constitute evidence of likely overpayment on the basis of which appropriate collection action may be taken;

(iii) that in any case in which a health maintenance organization is related to another organization by common ownership or control, a consolidated financial statement shall be filed and that the allowable costs for such organization may not include costs for the types of expense otherwise reimbursable under this title, in excess of those which would be determined to be reasonable in accordance with regulations (providing for limiting reimbursement to costs rather than charges to the health maintenance organization by related organizations and owners) issued by the Secretary in accordance with section 1861(v) of the Social Security Act; and

(iv) that in any case in which compensation is paid by a health maintenance organization substantially in excess of what is normally paid for similar services by similar practitioners (regardless of method of compensation), such compensation may as appropriate be considered to constitute a distribution of profits.

(4) The payments to health maintenance organizations under this subparagraph with respect to individuals described in subsection (a)(1)(A) shall be made from the Federal Hospital Insurance Trust Fund and the Federal Supplementary Medical Insurance Trust Fund. The portion of such payment to such an organization for a month to be paid by the latter trust fund shall be equal to 200 percent of the sum of—

(A) the product of (i) the number of covered enrollees of such organization for such month (as described in paragraph (1)) who have attained age 65, and (ii) the monthly actuarial rate for supplementary medical insurance for such month as determined under section 1839(c)(1), and

(B) the product of (i) the number of covered enrollees of such organization for such month (as described in paragraph (1)) who have not attained age 65, and (ii) the monthly actuarial rate for supplementary medical insurance for such month as determined under section 1839(c)(4).

The remainder of such payment shall be paid by the former trust fund. For limitation on Federal participation for capital expenditures which are out of conformity with a comprehensive plan of a State or areawide planning agency, see section 1122.

(b)(1) The term "health maintenance organization" means a legal entity which provides health services on a prepayment basis to individuals enrolled with such organizations and which—

(A) provides to its enrollees who are insured for benefits under parts A and B of this title or for benefits under part B alone, through institutions, entities, and persons meeting the applicable requirements of section 1861, all of the services and benefits covered under such parts (to the extent applicable under subparagraph (A) or (B) of subsection (a)(1)) which are available to individuals residing in the geographic area served by the organization;

(B) provides such services in the manner prescribed by section 1301(b) of the Public Health Service Act, except that solely for the purposes of this section—



(i) the term "basic health services" and references thereto shall be deemed to refer to the services and benefits included under parts A and B of this title;

(ii) the organization shall not be required to fix the basic health services payment under a community rating system;

(iii) the additional nominal payments authorized by section 1301(b)(1)(D) of such Act shall not exceed the limits applicable under subsection (g) of this section; and

(iv) payment for basic health services provided by the organization to its enrollees under this section or for services such enrollees receive other than through the organization shall be made as provided for by this title;

(C) is organized and operated in the manner prescribed by section 1301(c) of the Public Health Service Act, except that solely for the purposes of this section—

(i) the term "basic health services" and references thereto shall be deemed to refer to the services and benefits included under parts A and B of this title;

(ii) the organization shall not be reimbursed for the cost of reinsurance except as permitted by subsection (i) of this section; and

(iii) the organization shall have an open enrollment period as provided for in subsection (k) of this section.

(2)(A) The duties and functions of the Secretary, insofar as they involve making determinations as to whether an organization is a "health maintenance organization" within the meaning of paragraph (1), shall be administered through the Assistant Secretary for Health and in the Office of the Assistant Secretary for Health, and the administration of such duties and functions shall be integrated with the administration of section 1312(a) and (b) of the Public Health Service Act.

(B) Except as provided in subparagraph (A), the Secretary shall administer the provisions of this section through the Administrator of the Health Care Financing Administration.

(c) The benefits provided under this section to enrollees of an organization which has entered into a risk sharing contract with the Secretary pursuant to subsection (i)(2)(A) shall consist of—

(1) in the case of an individual who is entitled to hospital insurance benefits under part A and enrolled for medical insurance benefits under part B—

(A) entitlement to have payment made on his behalf for all services described in section 1812 and section 1832 which are furnished to him by the health maintenance organization with which he is enrolled pursuant to subsection (e) of this section; and

(B) entitlement to have payment made by such health maintenance organization to him or on his behalf for (i) such emergency services (as defined in regulations), (ii) such urgently needed services (as defined in regulations) furnished to him during a period of temporary absence (as defined in regulations) from the geographic area served by the health maintenance organization with which he is enrolled, and (iii) such other services as may be determined, in accordance with subsection (f), to be services which the individual was entitled to have furnished by the health maintenance organization, as may be furnished to him by a physician, supplier, or provider of services, other than the health maintenance organization with which he is enrolled; and

(2) in the case of an individual who is not entitled to hospital insurance benefits under part A but who is enrolled for medical insurance benefits under part B, entitlement to have payment made for services described in paragraph (1), but only to the extent that such services are also described in section 1832.

(d) Subject to the provisions of subsection (e), every individual described in subsection (c) shall be eligible to enroll with any health maintenance organization (as defined in subsection (b)) which serves the geographic area in which such individual resides.

(e) An individual may enroll with a health maintenance organization under this section, and may terminate such enrollment, as may be prescribed by regulations.

(f) Any individual enrolled with a health maintenance organization under this section who is dissatisfied by reason of his failure to receive without additional cost to him any health service to which he believes he is entitled shall, if the amount in controversy is \$100 or more, be entitled to a hearing before the Secretary to the same extent as is provided in section 205(b) and in any such hearing the Secretary shall make such health maintenance organization a party thereto. If the amount in controversy is \$1,000 or more, such individual or health maintenance organization shall be entitled to judicial review of the Secretary's final decision after such hearing as is provided in section 205(g).

(g)(1) If the health maintenance organization provides its enrollees under this section only the services described in subsection (c), its premium rate or other charges



for such enrollees shall not exceed the actuarial value of the deductible and coinsurance which would otherwise be applicable to such enrollees under part A and part B, if they were not enrolled under this section.

(2) If the health maintenance organization provides to its enrollees under this section services in addition to those described in subsection (c), election of coverage for such additional services shall be optional for such enrollees and such organization shall furnish such enrollees with information on the portion of its premium rate or other charges applicable to such additional services. The portion of its premium rate or other charges applicable to the services described in subsection (c) shall not exceed the actuarial value of the deductible and coinsurance which would otherwise be applicable to such enrollees under part A and part B if they were not enrolled under this section.

(h)(1) Except as provided in paragraph (2), each health maintenance organization with which the Secretary enters into a contract under this section shall have an enrolled membership at least half of which consists of individuals who have not attained age 65.

(2) The Secretary may waive the requirement imposed in paragraph (1) for a period of not more than three years from the date a health maintenance organization first enters into an agreement with the Secretary pursuant to subsection (i), but only for so long as such organization demonstrates to the satisfaction of the Secretary by the submission of its plan for each year that it is making continuous efforts and progress toward compliance with the provisions of paragraph (1) within such three-year period.

(i)(1) Subject to the limitations contained in subparagraphs (A) and (B) of paragraph (2), the Secretary is authorized to enter into a contract with any health maintenance organization which undertakes to provide, on an interim per capita prepayment basis, the services described in section 1832 (and section 1812, in the case of individuals who are entitled to hospital insurance benefits under part A) to individuals enrolled with such organization pursuant to subsection (e).

(2)(A) If the health maintenance organization (i) has a current enrollment of not less than 25,000 members on a prepaid capitation basis and has been the primary source of health care of at least 8,000 persons in each of the two years immediately preceding the contract year, or (ii) serves a nonurban geographic area, has a current enrollment of not less than 5,000 members on a prepaid capitation basis and has been the primary source of health care for at least 1,500 persons in each of the three years immediately preceding the contract year, the Secretary may enter into a risk sharing contract with such organization pursuant to which any savings, as determined pursuant to subsection (a)(3)(A), are shared between such organization and the Medicare Trust Funds in the manner prescribed in such subsection. For purposes of this subparagraph, a health maintenance organization shall be considered to serve a nonurban geographic area if it is located in a nonmetropolitan county (that is, a county with fewer than 50,000 inhabitants), or if it has at least one such county in its normal service area, or if it is located outside of a metropolitan area and its facilities are within reasonable travel distance (as defined by the Secretary) of fewer than 50,000 individuals. No health maintenance organization which has entered into a risk-sharing contract with the Secretary under this subparagraph and has voluntarily terminated such contract may again enter into such a contract.

(B) If the health maintenance organization does not meet the requirements of subparagraph (A), or if the Secretary is not satisfied that the health maintenance organization has the capacity to bear the risk of potential losses as determined under clause (ii) of subsection (a)(3)(A), or if the health maintenance organization meeting the requirements of subparagraph (A) so elects, or if an organization does not fully meet the requirements of section 1876(b) but has demonstrated to the satisfaction of the Secretary that it is making reasonable efforts to meet, and is developing the capability to fully meet, such requirements, and that it fully meets such basic requirements as the Secretary shall prescribe in regulations, the Secretary may, if he is otherwise satisfied that the health maintenance organization or other organization is able to perform its contractual obligations effectively and efficiently, enter into a contract with such organization pursuant to which such organization is reimbursed on the basis of its reasonable cost (as defined in section 1861(v)) in the manner prescribed in subsection (a)(3)(B).

(3) Such contract may, at the option of such organization, provide that the Secretary (A) will reimburse hospitals and skilled nursing facilities for the reasonable cost (as determined under section 1861(v)) of services furnished to individuals enrolled with such organization pursuant to subsection (e), and (B) will deduct the amount of such reimbursement from payments which would otherwise be made to such organization. If a health maintenance organization pays a hospital or skilled nursing facility directly, the amount paid shall not exceed the reasonable cost of the services (as determined under section 1861(v)) unless such organization demonstrates to the satisfaction of the

Secretary that such excess payments are justified on the basis of advantages gained by the organization.

(4) Each contract under this section shall be for a term of at least one year, as determined by the Secretary, and may be made automatically renewable from term to term in the absence of notice by either party of intention to terminate at the end of the current term; except that the Secretary may terminate any such contract at any time (after such reasonable notice and opportunity for hearing to the health maintenance organization involved as he may provide in regulations), if he finds that the organization (A) has failed substantially to carry out the contract, (B) is carrying out the contract in a manner inconsistent with the efficient and effective administration of this section, or (C) no longer substantially meets the applicable conditions of subsection (b).

(5) The effective date of any contract executed pursuant to this subsection shall be specified in such contract pursuant to the regulations.

(6) Each contract under this section—

(A) shall provide that the Secretary, or any person or organization designated by him—

(i) shall have the right to inspect or otherwise evaluate the quality, appropriateness, and timeliness of services performed under such contract; and

(ii) shall have the right to audit and inspect any books and records of such health maintenance organization which pertain to services performed and determinations of amounts payable under such contract;

(B) shall provide that no reinsurance costs (other than costs with respect to out-of-area services and, in the case of an organization which has entered into a risk-sharing contract with the Secretary pursuant to paragraph (2)(A), the cost of providing any member with basic health services the aggregate value of which exceeds \$5,000 in any year), including any underwriting of risk relating to costs in excess of adjusted average per capita cost, as defined in clause (iii) of subsection (a)(3)(A), shall be allowed for purposes of determining payments authorized under this section; and

(C) shall contain such other terms and conditions not inconsistent with this section as the Secretary may find necessary.

(j) The function vested in the Secretary by subsection (i) may be performed without regard to such provisions of law or of other regulations relating to the making, performance, amendment, or modification of contracts of the United States as the Secretary may determine to be inconsistent with the furtherance of the purposes of this title.

(k) Each health maintenance organization with which the Secretary enters into a contract under this section shall have an open enrollment period at least every year under which it accepts up to the limits of its capacity and without restrictions, except as may be authorized in regulations, individuals who are eligible to enroll under subsection (d) in the order in which they apply for enrollment (unless to do so would result in failure to meet the requirements of subsection (h))<sup>13</sup> or would result in enrollment of enrollees substantially nonrepresentative, as determined in accordance with regulations of the Secretary, of the population in the geographic area served by such health maintenance organization<sup>14</sup>.

Sec. 1902. (a)

(10)

(A) for making medical assistance available, including at least the care and services listed in paragraphs (1) through (5) and (17) of section 1905(a), to all individuals receiving aid or assistance under any plan of the State approved under title I, X, XIV, or XVI, or part A or part E of title IV (including pregnant women deemed by the State to be receiving such aid as authorized in section 406(g) and individuals considered by the State to be receiving such aid as authorized under section 414(g)), or with respect to whom supplemental security income benefits are being paid under title XVI;

(14) effective January 1, 1973, provide that—

(A) in the case of individuals receiving aid or assistance under any plan of the State approved under title I, X, XIV, or XVI, or part A of title IV, or with respect to whom supplemental security income benefits are being paid under title XVI, or who meet the income and resources requirements of the appropriate State plan, or the supplemental security income program under title XVI, as the case may be, and individuals with respect to whom there is being paid, or who are eligible, or would be eligible if they were not in a

<sup>13</sup>As in original. Closing parenthesis probably should be after "organization" and before the period.

<sup>14</sup>See footnote 1.



medical institution, to have paid with respect to them, a State supplementary payment and are eligible for medical assistance equal in amount, duration, and scope to the medical assistance made available to individuals described in paragraph (10)(A)—

(i) no enrollment fee, premium, or similar charge, and no deduction, cost sharing, or similar charge with respect to the care and services listed in paragraph (1) through (5), (7), and (17) of section 1905(a), will be imposed under the plan, and

(ii) any deduction, cost sharing, or similar charge imposed under the plan with respect to other care and services will be nominal in amount (as determined in accordance with standards approved by the Secretary and included in the plan), and

(B) with respect to individuals (other than individuals with respect to whom there is being paid, or who are eligible or would be eligible if they were not in a medical institution, to have paid with respect to them, a State supplementary payment and are eligible for medical assistance equal in amount, duration, and scope to the medical assistance made available to individuals described in paragraph (10)(A)) who are not receiving aid or assistance under any such State plan and with respect to whom supplemental security income benefits are not being paid under title XVI and who do not meet the income and resources requirements of the appropriate State plan, or the supplemental security income program under title XVI, as the case may be—

(i) there may be imposed an enrollment fee, premium, or similar charge which (as determined in accordance with standards prescribed by the Secretary) is related to the individual's income, and

(ii) any deductible, cost-sharing, or similar charge imposed under the plan will be nominal;

(18) provide that no lien may be imposed against the property of any individual prior to his death on account of medical assistance paid or to be paid on his behalf under the plan (except pursuant to the judgment of a court on account of benefits incorrectly paid on behalf of such individual), and that there shall be no adjustment or recovery (except, in the case of an individual who was 65 years of age or older when he received such assistance, from his estate, and then only after the death of his surviving spouse, if any, and only at a time when he has no surviving child who is under age 21 or (with respect to States eligible to participate in the State program established under title XVI), is blind or permanently and totally disabled, or is blind or disabled as defined in section 1614 (with respect to States which are not eligible to participate in such program)) of any medical assistance correctly paid on behalf of such individual under the plan;

(b)

(2) any age requirement which excludes any individual who has not attained the age of 19 and is a dependent child under part A of title IV;

(j)(1) Notwithstanding any other provision of this title, an individual who would otherwise be eligible for medical assistance under the State plan approved under this title may be denied such assistance if such individual would not be eligible for such medical assistance but for the fact that he disposed of resources for less than fair market value. If the State plan provides for the denial of such assistance by reason of such disposal of resources, the State plan shall specify a procedure for implementing such denial which, except as provided in paragraph (2), is not more restrictive than the procedure specified in section 1613(c) of this Act.

(2) In any case where the uncompensated value of disposed of resources exceeds \$12,000, the State plan may provide for a period of ineligibility which exceeds 24 months. If a State plan provides for a period of ineligibility exceeding 24 months, such plan shall provide for the period of ineligibility to bear a reasonable relationship to such uncompensated value.

(3) In any case where an individual is ineligible for medical assistance under the State plan solely because of the applicability to such individual of the provisions of section 1613(c), the State plan may provide for the eligibility of such individual for medical assistance under the plan if such individual would be so eligible if the State plan requirements with respect to disposal of resources applicable under paragraphs (1) and (2) of this subsection were applied in lieu of the provisions of section 1613(c).

Sec. 1903.

(t)

(3) Only for the purpose of computing under this subsection the Federal share of expenditures for a State for fiscal year 1984 (in the case of the payment which may be made for the first quarter of fiscal year 1985), the Federal medical assistance percentage for fiscal year 1984 shall be the Federal medical assistance percentage for



**SUPERSEDED PROVISIONS—SOCIAL SECURITY ACT**

337 03/86

47 FR 51003 345

States in effect for fiscal year 1983, disregarding any change in such percentage between fiscal year 1983 and fiscal year 1984.

**SEC. 1915.**

(c)

(2)

(B) the State will provide, with respect to individuals who are entitled to medical assistance for skilled nursing facility or intermediate care facility services under the State plan and who may require such services, for an evaluation of the need for such services;

---

**Provisions of the Social Security Act As in Effect Prior to  
P.L. 97-300, Approved October 13, 1982 (96 Stat. 1322)  
Job Training Partnership Act**

**SEC. 432.**

(d) In providing the manpower training and employment services and opportunities required by this part, the Secretary of Labor shall, to the maximum extent feasible, assure that such services and opportunities are provided by using all authority available to him under this or any other Act. In order to assure that the services and opportunities so required are provided, the Secretary of Labor shall use the funds appropriated to him under this part to provide programs required by this part through such other Act, to the same extent and under the same conditions (except as regards the Federal matching percentage) as if appropriated under such other Act and, in making use of the programs of other Federal, State, or local agencies (public or private), the Secretary of Labor may reimburse such agencies for services rendered to persons under this part to the extent such services and opportunities are not otherwise available on a nonreimbursable basis.

(f)(1) The Secretary of Labor shall establish in each State, municipality, or other appropriate geographic area with a significant number of persons registered pursuant to section 402(a)(19)(A) a Labor Market Advisory Council the function of which will be to identify and advise the Secretary of the types of jobs available or likely to become available in the area served by the Council; except that if there is already located in any area an appropriate body to perform such function, the Secretary may designate such body as the Labor Market Advisory Council for such area.

(2) Any such Council shall include representatives of industry, labor, and public service employers from the area to be served by the Council.

---

**Provision Deemed to be in Social Security Act as in Effect Prior to  
November 10, 1982 (47 Federal Register 51003)  
[Cost-of-Living Increase; Extension]**

**SEC. 215.**

(a)

**TABLE FOR DETERMINING PRIMARY INSURANCE AMOUNT AND MAXIMUM FAMILY  
BENEFITS BEGINNING JANUARY 1982<sup>1</sup>**

## SUPERSEDED PROVISIONS—SOCIAL SECURITY ACT

346 47 FR 51003

337 03/86

I (Primary insurance benefit under 1939 Act, as modified)		II (Primary insurance amount effective for June 1981)	III (Average monthly wage)		IV (Primary insurance amount)	V (Maximum family benefits)
If an individual's primary insurance benefit (as determined under subsec. (d)) is—		Or his primary insurance amount (as determined under subsec. (c)) is—	Or his average monthly wage (as determined under subsec. (b)) is—		The amount referred to in the preceding paragraphs of this subsection shall be—	And the maximum amount of benefits payable (as provided in sec. 203(a)) on the basis of his wages and self-employment income shall be—
At least—	But not more than—		At least—	But not more than—		
			2,476	2,480	1,227.70	2,148.50
			2,481	2,485	1,228.70	2,150.30
			2,486	2,490	1,229.70	2,152.00
			2,491	2,495	1,230.70	2,153.80
			2,496	2,500	1,231.70	2,155.50
			2,501	2,505	1,232.70	2,157.30
			2,506	2,510	1,233.70	2,159.00
			2,511	2,515	1,234.70	2,160.80
			2,516	2,520	1,235.70	2,162.50
			2,521	2,525	1,236.70	2,164.30
			2,526	2,530	1,237.70	2,166.00
			2,531	2,535	1,238.70	2,167.80
			2,536	2,540	1,239.70	2,169.50
			2,541	2,545	1,240.70	2,171.30
			2,546	2,550	1,241.70	2,173.00
			2,551	2,555	1,242.70	2,174.80
			2,556	2,560	1,243.70	2,176.50
			2,561	2,565	1,244.70	2,178.30
			2,566	2,570	1,245.70	2,180.00
			2,571	2,575	1,246.70	2,181.80
			2,576	2,580	1,247.70	2,183.50
			2,581	2,585	1,248.70	2,185.30
			2,586	2,590	1,249.70	2,187.00
			2,591	2,595	1,250.70	2,188.80
			2,596	2,600	1,251.70	2,190.50
			2,601	2,605	1,252.70	2,192.30
			2,606	2,610	1,253.70	2,194.00
			2,611	2,615	1,254.70	2,195.80
			2,616	2,620	1,255.70	2,197.50
			2,621	2,625	1,256.70	2,199.30
			2,626	2,630	1,257.70	2,201.00
			2,631	2,635	1,258.70	2,202.80
			2,636	2,640	1,259.70	2,204.50
			2,641	2,645	1,260.70	2,206.30
			2,646	2,650	1,261.70	2,208.00
			2,651	2,655	1,262.70	2,209.80
			2,656	2,660	1,263.70	2,211.50
			2,661	2,665	1,264.70	2,213.30
			2,666	2,670	1,265.70	2,215.00
			2,671	2,675	1,266.70	2,216.80
			2,676	2,680	1,267.70	2,218.50
			2,681	2,685	1,268.70	2,220.30
			2,686	2,690	1,269.70	2,222.00
			2,691	2,695	1,270.70	2,223.80
			2,696	2,700	1,271.70	2,225.50

<sup>1</sup>This extension was published at 46 FR 53791, October 30, 1981. This data was prepared and published as required by Social Security Act §215(a)(5) and §215(i)(2)(D).

**Provision of the Social Security Act As in Effect Prior to  
P.L. 97-375, Approved December 21, 1982 (96 Stat. 1819)  
Congressional Reports Elimination Act of 1982**

**SEC. 1120.**

(b) The Secretary shall submit an annual report to Congress setting forth a description of each project approved under subsection (a) during the year preceding such report, including a statement of the purpose, probable cost, and expected duration of each such project.

**Provisions of the Social Security Act as in Effect Prior to  
P. L. 97-448, Approved January 12, 1983 (96 Stat. 2365)  
Technical Corrections Act of 1982**

**[SEC. 1814. (i)]****PAYMENT FOR HOSPICE CARE****[SEC. 1861. (dd)]****HOSPICE CARE; HOSPICE PROGRAM****SEC. 1903.**

(t)

(3) Only for the purpose of computing under this subsection the Federal share of expenditures for a State for fiscal years 1982, 1983, and 1984 (in the case of the payment which may be made for the first quarter of fiscal years 1983, 1984, and 1985, respectively), the Federal medical assistance percentage for fiscal years 1982, 1983, and 1984 shall be the Federal medical assistance percentage for States in effect for fiscal year 1981, disregarding any change in such percentage after fiscal year 1981.

**Provisions of the Social Security Act as in Effect Prior to  
P.L. 98-21, Approved April 20, 1983 (97 Stat. 65)  
Social Security Amendments of 1983**

**SEC. 201.**

(b)

(1) (K) 1.65 per centum of the wages (as so defined) paid after December 31, 1981, and before January 1, 1985, and so reported, (L) 1.90 per centum of the wages (as so defined) paid after December 31, 1984, and before January 1, 1990, and so reported, and (M) 2.20 per centum of the wages (as so defined) paid after December 31, 1989, and so reported,

(2) (K) 1.2375 per centum of the amount of self-employment income (as so defined) so reported for any taxable year beginning after December 31, 1981, and before January 1, 1985, (L) 1.4250 per centum of the amount of self-employment income (as so defined) so reported for any taxable year beginning after December 31, 1984, and before January 1, 1990, and (M) 1.6500 per centum of the amount of self-employment income (as so defined) so reported for any taxable year beginning after December 31, 1989,

**SEC. 202.**

(c)(1)

shall be entitled to a husband's insurance benefit for each month, beginning with—

(i) in the case of a husband (as so defined) of an individual who is entitled to an old-age insurance benefit, if such husband has attained retirement age (as defined in section 216(l))<sup>1</sup>, the first month in which he meets the criteria specified in subparagraphs (A), (B), and (C), or

(ii) in the case of a husband (as so defined) of—

(I) an individual entitled to old-age insurance benefits, if such husband has not attained retirement age (as defined in section 216(l))<sup>2</sup>, or

<sup>1</sup>P.L.98-21, §201(c)(1)(A), struck out "age 65" and substituted "retirement age (as defined in section 216(l))", effective with respect to monthly benefits payable under title II for months after April 20, 1983.

<sup>2</sup>See footnote 1.



(II) an individual entitled to disability benefits, the first month throughout which he is such a husband and meets the criteria specified in subparagraphs (B) and (C) (if in such month he meets the criterion specified in subparagraph (A)), whichever is earlier, and ending with the month preceding the month in which any of the following occurs: he dies, his wife dies, they are divorced, he becomes entitled to an old-age or disability insurance benefit based on a primary insurance amount which is equal to or exceeds one-half of the primary insurance amount of his wife, or his wife is not entitled to disability insurance benefits and is not entitled to old-age insurance benefits.

(d)

(5) ; except that, in the case of such a marriage to a male individual entitled to benefits under section 223(a) or this subsection, the preceding provisions of this paragraph shall not apply with respect to benefits for months after the last month for which such individual is entitled to such benefits under section 223(a) or this subsection unless (i) he ceases to be so entitled by reason of his death, or (ii) in the case of an individual who was entitled to benefits under section 223(a), he is entitled, for the month following such last month, to benefits under subsection (a) of this section.

(e)

(2)(A) Except as provided in subsection (q), paragraph (7)<sup>3</sup> of this subsection, and subparagraph (B) of this paragraph, such widow's insurance benefit for each month shall be equal to the primary insurance amount (as determined after application of the following sentence) of such deceased individual.

(3) If a widow, before attaining age 60, or a surviving divorced wife, marries—

(A) an individual entitled to benefits under subsection (f) or (h) of this section, or

(B) an individual who has attained the age of eighteen and is entitled to benefits under subsection (d).

such widow's or surviving divorced wife's entitlement to benefits under this subsection shall, notwithstanding the provisions of paragraph (1) but subject to subsection (s), not be terminated by reason of such marriage; except that, in the case of such a marriage to an individual entitled to benefits under subsection (d), the preceding provisions of this paragraph shall not apply with respect to benefits for months after the last month for which such individual is entitled to such benefits under subsection (d) unless he ceases to be so entitled by reason of his death.

(4) If a widow, after attaining age 60, marries, such marriage shall, for purposes of paragraph (1), be deemed not to have occurred.

(f)

(4) If a widower, before attaining age 60, remarries—

(A) an individual entitled to benefits under subsection (b), (e), (g), or (h), or

(B) an individual who has attained the age of eighteen and is entitled to benefits under subsection (d),

such widower's entitlement to benefits under this subsection shall, notwithstanding the provisions of paragraph (1) but subject to subsection (s), not be terminated by reason of such marriage.

(5) If a widower, after attaining age 60, marries, such marriage shall, for purposes of paragraph (1), be deemed not to have occurred.

(g)

(3) ; except that, in the case of such a marriage to an individual entitled to benefits under section 223(a) or subsection (d) of this section, the preceding provisions of this paragraph shall not apply with respect to benefits for months after the last month for which such individual is entitled to such benefits under section 223(a) or subsection (d) of this section unless (i) such individual<sup>4</sup> ceases to be so entitled by reason of his death, or (ii) in the case of an individual who was entitled to benefits under section 223(a), such individual<sup>5</sup> is entitled, for the month following such last month, to benefits under subsection (a) of this section.

(q)(1) and in the case of a widow or widower whose first month of entitlement to a widow's or widower's insurance benefit is a month before the month in which such widow or widower attains age 60, such benefit, reduced pursuant to the preceding provisions of this paragraph (and before the application of the second sentence of paragraph (8)), shall be further reduced by—

(C) 43/240 of 1 percent of the amount of such benefit, multiplied by—

<sup>3</sup>P.L. 98-21, §131(a)(3)(D), struck out "(8)" and substituted "(7)", effective with respect to monthly benefits payable under title II for months after December 1983.

<sup>4</sup>P.L. 98-21, §306(a)(3), struck out "he" and substituted "such individual", effective only with respect to monthly benefits payable under title II of this Act for months after April 1983.

<sup>5</sup>See footnote 3.

- (D)(i) the number of months in the additional reduction period for such benefit (determined under paragraph (6)(B)), if such benefit is for a month before the month in which such individual attains age 62, or
- (ii) if less, the number of months in the additional adjusted reduction period for such benefit (determined under paragraph (7)), if such benefit is for the month in which such individual attains age 62 or any month thereafter.
- (6) For the purposes of this subsection—
- (A) the “reduction period” for an individual’s old-age, wife’s, husband’s, widow’s, or widower’s insurance benefit is the period—
- (i) beginning—
- (I) in the case of an old-age or husband’s insurance benefit, with the first day of the first month for which such individual is entitled to such benefit, or
- (II) in the case of a wife’s insurance benefit, with the first day of the first month for which a certificate described in paragraph (5)(A)(i) is effective, or
- (III) in the case of a widow’s or widower’s insurance benefit, with the first day of the first month for which such individual is entitled to such benefit or the first day of the month in which such individual attains age 60, whichever is the later, and
- (ii) ending with the last day of the month before the month in which such individual attains retirement age; and
- (B) the “additional reduction period” for an individual’s widow’s or widower’s insurance benefit is the period—
- (i) beginning with the first day of the first month for which such individual is entitled to such benefit, but only if such individual has not attained age 60 in such first month, and
- (ii) ending with the last day of the month before the month in which such individual attains age 60.
- (9) For purposes of this subsection, the term “retirement age” means age 65.
- (w)(1)
- (A)  $1/12$  of 1 percent of such amount, or, in the case of an individual who first becomes eligible for an old-age insurance benefit after December 1978, one-quarter of 1 percent of such amount, multiplied by

Sec. 203. (a)

(3)(A)

(ii) an amount equal to the product of 1.75 and the primary insurance amount that would be computed under section 215(a)(1) for that month with respect to average indexed monthly earnings equal to one-twelfth of the contribution and benefit base determined for that year under section 230.

#### Deductions on Account of Noncovered Work Outside the United States or Failure to Have Child in Care

(c) Deductions, in such amounts and at such time or times as the Secretary shall determine, shall be made from any payment or payments under this title to which an individual is entitled, until the total of such deductions equals such individual’s benefit or benefits under section 202 for any month—

- (1) in which such individual is under the age of seventy and on seven or more different calendar days of which he engaged in noncovered remunerative activity outside the United States; or
- (2) in which such individual, if a wife under age sixty-five entitled to a wife’s insurance benefit, did not have in her care (individually or jointly with her husband) a child of her husband entitled to a child’s insurance benefit and such wife’s insurance benefit for such month was not reduced under the provisions of section 202(q); or
- (3) in which such individual, if a widow entitled to a mother’s insurance benefit, did not have in her care a child of her deceased husband entitled to a child’s insurance benefit; or
- (4) in which such individual, if a surviving divorced mother entitled to a mother’s insurance benefit, did not have in her care a child of her deceased former husband who (A) is her son, daughter, or legally adopted child and (B) is entitled to a child’s insurance benefit on the basis of the wages and self-employment income of her deceased former husband.

\*As in original. Punctuation omitted.



For purposes of paragraphs (2), (3), and (4) of this subsection, a child shall not be considered to be entitled to a child's insurance benefit for any month in which paragraph (1) of section 202(s) applies or an event specified in section 222(b) occurs with respect to such child. Subject to paragraph (3) of such section 202(s), no deduction shall be made under this subsection from any child's insurance benefit for the month in which the child entitled to such benefit attained the age of eighteen or any subsequent month; nor shall any deduction be made under this subsection from any widow's insurance benefits for any month in which the widow or surviving divorced wife is entitled and has not attained age 65 (but only if she became so entitled prior to attaining age 60), or from any widower's insurance benefit for any month in which the widower is entitled and has not attained age 65 (but only if he became so entitled prior to attaining age 60).

## SEC. 209.

(b) (1) retirement, or

(c) Any payment made to an employee (including any amount paid by an employer for insurance or annuities, or into a fund, to provide for any such payment) on account of retirement;

(i) Any payment (other than vacation or sick pay) made to an employee after the month in which he attains age 62, if he did not work for the employer in the period for which such payment is made. As used in this subsection, the term "sick pay" includes remuneration for service in the employ of a State, a political subdivision (as defined in section 218(b)(2)) of a State, or an instrumentality of two or more States, paid to an employee thereof for a period during which he was absent from work because of sickness.<sup>7</sup>;

(m)

(1) (C) retirement after attaining an age specified in the plan referred to in paragraph (2) or in a pension plan of the employer,

## SEC. 210.

(a) (B) outside the United States by a citizen or resident\* of the United States as an employee (i) of an American employer (as defined in subsection (e)), or (ii) of a foreign subsidiary (as defined in section 3121(l) of the Internal Revenue Code of 1954) of a domestic corporation (as determined in accordance with section 7701 of the Internal Revenue Code of 1954) during any period for which there is in effect an agreement, entered into pursuant to section 3121(l) of the Internal Revenue Code of 1954, with respect to such subsidiary;

(5) Service performed in the employ of any instrumentality of the United States, if such instrumentality is exempt from the tax imposed by section 1410 of the Internal Revenue Code by virtue of any provision of law which specifically refers to such section in granting such exemption;

(6)(A) Service performed in the employ of the United States or in the employ of any instrumentality of the United States, if such service is covered by a retirement system established by a law of the United States;

(B) Service performed by an individual in the employ of an instrumentality of the United States if such an instrumentality was exempt from the tax imposed by section 1410 of the Internal Revenue Code on December 31, 1950, and if such service is covered by a retirement system established by such instrumentality; except that the provisions of this subparagraph shall not be applicable to—

(i) service performed in the employ of a corporation which is wholly owned by the United States;

(ii) service performed in the employ of a Federal land bank, a Federal intermediate credit bank, a bank for cooperatives, a Federal land bank association, a production credit association, a Federal Reserve Bank, a Federal Home Loan Bank, or a Federal Credit Union;

(iii) service performed in the employ of a State, county, or community committee under the Production and Marketing Administration;

(iv) service performed by a civilian employee, not compensated from funds appropriated by the Congress, in the Army and Air Force Exchange Service, Army and Air Force Motion Picture Service, Navy Exchanges, Marine Corps Exchanges, or other activities, conducted by an instrumentality of the United States subject to the jurisdiction of the Secretary of Defense, at installations of the Department of Defense for the comfort, pleasure, contentment, and mental and physical improvement of personnel of such Department; or

(v) service performed by a civilian employee, not compensated from funds appropriated by the Congress, in the Coast Guard Exchanges or other

<sup>7</sup>As in original. Period should be stricken.

\*P.L. 98-21, §323(a)(2), inserted "or resident", effective with respect to remuneration paid after December 31, 1983.



activities, conducted by an instrumentality of the United States subject to the jurisdiction of the Secretary of Transportation, at installations of the Coast Guard for the comfort, pleasure, contentment, and mental and physical improvement of personnel of the Coast Guard;

(C) Service performed in the employ of the United States or in the employ of any instrumentality of the United States, if such service is performed—

(i) as the President or Vice President of the United States or as a Member, Delegate, or Resident Commissioner of or to the Congress;

(ii) in the legislative branch;

(iii) in a penal institution of the United States by an inmate thereof;

(iv) by any individual as an employee included under section 5351(2) of title 5, United States Code (relating to certain interns, student nurses, and other student employees of hospitals of the Federal Government), other than as a medical or dental intern or a medical or dental resident in training;

(v) by any individual as an employee serving on a temporary basis in case of fire, storm, earthquake, flood, or other similar emergency; or

(vi) by any individual to whom subchapter III of chapter 83 of title 5, United States Code, does not apply because such individual is subject to another retirement system (other than the retirement system of the Tennessee Valley Authority);

(8)

(B) Service performed in the employ of a religious, charitable, educational, or other organization described in section 501(c)(3) of the Internal Revenue Code of 1954, which is exempt from income tax under section 501(a) of such Code, but this subparagraph shall not apply to service performed during the period for which a certificate, filed pursuant to section 3121(k) of the Internal Revenue Code of 1954 (or deemed to have been so filed under paragraph (4) or (5) of such section 3121(k)), is in effect if such service is performed by an employee—

(i) whose signature appears on the list filed (or deemed to have been filed) by such organization under such section 3121(k),

(ii) who became an employee of such organization after the calendar quarter in which the certificate (other than a certificate referred to in clause (iii)) was filed (or deemed to have been filed), or

(iii) who, after the calendar quarter in which the certificate was filed (or deemed to have been filed) with respect to a group described in paragraph (1)(E) of such section 3121(k), became a member of such group,

except that this subparagraph shall apply with respect to service performed by an employee as a member of a group described in such paragraph (1)(E) with respect to which no certificate is (or is deemed to be) in effect;

(p)

(1) subparagraph (A), (B), or (C)(i), (ii), or (vi) of subsection (a)(6), or

(2) subsection (a)(5).

SEC. 211.

(a)

(10) In the case of an individual who has been a resident of the United States during the entire taxable year, the exclusion from gross income provided by section 911(a)(2) of the Internal Revenue Code of 1954 shall not apply;<sup>9</sup>

(10) In the case of an individual described in section 911(d)(1)(B) of the Internal Revenue Code of 1954, the exclusion from gross income provided by section 911(a)(1) of such Code shall not apply;<sup>10</sup>

SEC. 215.

(i)(1)

(B) in which the Consumer Price Index prepared by the Department of Labor exceeds, by not less than 3 per centum, such Index in the later of (i) the last prior cost-of-living computation quarter which was established under this subparagraph, or (ii) the most recent calendar quarter in which occurred the effective month of a general benefit increase under this title;

【SEC. 216. (d)】 Divorced Wives; Divorce

SEC. 217.

(g)(1) In September of 1965, 1970, and 1975, and in October 1980 and in every fifth October thereafter up to and including October 2010, the Secretary shall determine the amount which, if paid in equal installments at the beginning of each fiscal year in the period beginning—

<sup>9</sup>P.L. 98-21, §124(c)(3), struck out “and”.

<sup>10</sup>P.L. 98-21, §323(b)(2)(B), amended paragraph (10) in its entirety, making this paragraph (10) effective with respect to taxable years beginning after December 31, 1981, and before January 1, 1984.

(A) with July 1, 1965, in the case of the first such determination, and

(B) with the beginning of the first fiscal year commencing after the determination in the case of all other such determinations, and ending with the close of September 30, 2015, would accumulate, with interest compounded annually, to an amount equal to the amount needed to place each of the Trust Funds and the Federal Hospital Insurance Trust Fund in the same position at the close of September 30, 2015, as he estimates they would otherwise be in at the close of that date if section 210 of this Act as in effect prior to the Social Security Act Amendments of 1950, and this section, had not been enacted. The rate of interest to be used in determining such amount shall be the rate determined under section 201(d) for public-debt obligations which were or could have been issued for purchase by the Trust Funds in the June preceding the September in which the determinations in 1965, 1970, and 1975 are made and in the September preceding the October in which all other determinations are made.

(2) There are authorized to be appropriated to the Trust Funds and the Federal Hospital Insurance Trust Fund—

(A) for the fiscal year ending June 30, 1966, an amount equal to the amount determined under paragraph (1) in September 1965, and

(B) for each fiscal year in the period beginning with July 1, 1966, and ending with the close of September 30, 2015, an amount equal to the annual installment for such fiscal year under the most recent determination under paragraph (1) which precedes such fiscal year.

(3) For the fiscal year ending September 30, 2016, there is authorized to be appropriated to the Trust Funds and the Federal Hospital Insurance Trust Fund such sums as the Secretary determines would place the Trust Funds and the Federal Hospital Insurance Trust Fund in the same position in which they would have been at the close of September 30, 2015, if section 210 of this Act as in effect prior to the Social Security Act Amendments of 1950, and this section, had not been enacted.

(4) There are authorized to be appropriated to the Trust Funds and the Federal Hospital Insurance Trust Fund annually, as benefits under this title and part A of title XVIII are paid after September 30, 2015, such sums as the Secretary determines to be necessary to meet the additional costs, resulting from subsections (a), (b), and (e), of such benefits (including lump-sum death payments).

#### SEC. 218.

##### (e)(1)

(A) that the State will pay to the Secretary of the Treasury, within the thirty-day period immediately following the last day of each calendar month, amounts equivalent to the sum of the taxes which would be imposed by sections 3101 and 3111 of the Internal Revenue Code of 1954 if the services for which wages were paid in such month to employees covered by the agreement constituted employment as defined in section 3121 of such Code; and

#### Termination of Agreement

(g)(1) Upon giving at least two years' advance notice in writing to the Administrator, a State may terminate, effective at the end of a calendar year specified in the notice, its agreement with the Administrator either—

(A) in its entirety, but only if the agreement has been in effect from its effective date for not less than five years prior to the receipt of such notice; or

(B) with respect to any coverage group designated by the State, but only if the agreement has been in effect with respect to such coverage group for not less than five years prior to the receipt of such notice.

(2) If the Administrator, after reasonable notice and opportunity for hearing to a State with whom he has entered into an agreement pursuant to this section, finds that the State has failed or is no longer legally able to comply substantially with any provision of such agreement or of this section, he shall notify such State that the agreement will be terminated in its entirety, or with respect to any one or more coverage groups designated by him, at such time, not later than two years from the date of such notice, as he deems appropriate, unless prior to such time he finds that there no longer is any such failure or that the cause for such legal inability has been removed.

(3) If any agreement entered into under this section is terminated in its entirety, the Administrator and the State may not again enter into an agreement pursuant to this section. If any such agreement is terminated with respect to any coverage group, the Administrator and the State may not thereafter modify such agreement so as to again make the agreement applicable with respect to such coverage group.



## SEC. 226.

(e)

(3) For purposes of determining entitlement to hospital insurance benefits under subsection (b) any disabled widow age 50 or older who is entitled to mother's insurance benefits (and who would have been entitled to widow's insurance benefits by reason of disability if she had filed for such widow's benefits) shall, upon application, for such hospital insurance benefits be deemed to have filed for such widow's benefits and shall, upon furnishing proof of such disability prior to July 1, 1974, under such procedures as the Secretary may prescribe, be deemed to have been entitled to such widow's benefits as of the time she would have been entitled to such widow's benefits if she had filed a timely application therefor.

## SEC. 228.

(b)

(2) If both husband and wife are entitled (or upon application would be entitled) to benefits under this section for any month, the amount of the husband's benefit for such month shall be the larger of \$64.40 or the amount most recently established in lieu thereof under section 215(i) and the amount of the wife's benefit for such month shall be the larger of \$32.20 or the amount most recently established in lieu thereof under section 215(i).

(c)

(2) (B) the larger of \$32.20 or the amount most recently established in lieu thereof under section 215(i).

(3) In the case of a husband and wife both of whom are entitled to benefits under this section for any month—

(A) the benefit amount of the wife, after any reduction under paragraph (1), shall be further reduced (but not below zero) by the excess (if any) of (i) the total amount of any periodic benefits under governmental pension systems for which the husband is eligible for such month, over (ii) the larger of \$64.40 or the amount most recently established in lieu thereof under section 215(i), and

(B) the benefit amount of the husband, after any reduction under paragraph (1), shall be further reduced (but not below zero) by the excess (if any) of (i) the total amount of any periodic benefits under governmental pension systems for which the wife is eligible for such month, over (ii) the larger of \$32.20 or the amount most recently established in lieu thereof under section 215(i).

## SEC. 229.

(b) There are authorized to be appropriated to the Federal Old-Age and Survivors Insurance Trust Fund, the Federal Disability Insurance Trust Fund, and the Federal Hospital Insurance Trust Fund annually, as benefits under this title and part A of title XVIII are paid after December 1967, such sums as the Secretary determines to be necessary to meet (1) the additional costs, resulting from subsection (a), of such benefits (including lump-sum death payments), (2) the additional administrative expenses resulting therefrom, and (3) any loss in interest to such trust funds resulting from the payment of such amounts. Such additional costs shall be determined after any increases in such benefits arising from the application of section 217 have been made.

## SEC. 402. (a)

(36) assistance received to assist in meeting the costs of home energy, including both heating and cooling, which (as determined under regulations of the Secretary by such State agency as the chief executive officer of the State may designate) (A) is based on need for such assistance, and (B)

## SEC. 1612.

(b)

(13) any assistance received to assist in meeting the costs of home energy, including both heating and cooling, which (as determined under regulations of the Secretary by such State agency as the chief executive officer of the State may designate) (A) is based on need for such assistance, and (B)

SEC. 1839. (a) The monthly premium of each individual enrolled under this part for each month before 1968 shall be \$3.

(b)(1) The monthly premium of each individual enrolled under this part for each month after 1967 and before July 1, 1973, shall be the amount determined under paragraph (2).

(2) The Secretary shall, during December 1968 and of each year ending on or before December 31, 1971, determine and promulgate the dollar amount (whether or not such dollar amount was applicable for premiums for any prior month) which shall be applicable for premiums for months occurring in the 12-month period commencing July 1 in each succeeding year. Such dollar amount shall be such amount as the Secretary estimates to be necessary so that the aggregate premiums for such 12-month



period will equal one-half of the total of the benefits and administrative costs which he estimates will be payable from the Federal Supplementary Medical Insurance Trust Fund for such 12-month period. In estimating aggregate benefits payable for any period, the Secretary shall include an appropriate amount for a contingency margin. Whenever the Secretary, pursuant to the preceding sentence, promulgates the dollar amount which shall be applicable for premiums for any period, he shall, at the time such promulgation is announced, issue a public statement setting forth the actuarial assumptions and bases employed by him in arriving at the amount of premiums so promulgated.

(c)(1) The Secretary shall, during December of 1972 and of each year thereafter, determine the monthly actuarial rate for enrollees age 65 and over which shall be applicable for the 12-month period commencing July 1 in the succeeding year. Such actuarial rate shall be the amount the Secretary estimates to be necessary so that the aggregate amount for such 12-month period with respect to those enrollees age 65 and over will equal one-half of the total of the benefits and administrative costs which he estimates will be payable from the Federal Supplementary Medical Insurance Trust Fund for services performed and related administrative costs incurred in such 12-month period. In calculating the monthly actuarial rate, the Secretary shall include an appropriate amount for a contingency margin.

(2) The monthly premium of each individual enrolled under this part for each month after June 1973 shall, except as provided in subsections (d) and (g), be the amount determined under paragraph (3).

(3) The Secretary shall, during December of 1972 and of each year thereafter, determine and promulgate the monthly premium applicable for the individuals enrolled under this part for the 12-month period commencing July 1 in the succeeding year. The monthly premium shall (except as otherwise provided in subsection (g)) be equal to the smaller of—

(A) the monthly actuarial rate for enrollees age 65 and over, determined according to paragraph (1) of this subsection, for that 12-month period, or

(B) the monthly premium rate most recently promulgated by the Secretary under this paragraph, increased by a percentage determined as follows: The Secretary shall ascertain the primary insurance amount computed under section 215(a)(1), based upon average indexed monthly earnings of \$900, that applied to individuals who became eligible for and entitled to old-age insurance benefits on May 1 of the year of the promulgation. He shall increase the monthly premium rate by the same percentage by which that primary insurance amount is increased when, by reason of the law in effect at the time the promulgation is made, it is so computed to apply to those individuals on the following May 1.

Whenever the Secretary promulgates the dollar amount which shall be applicable as the monthly premium for any period, he shall, at the time such promulgation is announced, issue a public statement setting forth the actuarial assumptions and bases employed by him in arriving at the amount of an adequate actuarial rate for enrollees age 65 and over as provided in paragraph (1) and the derivation of the dollar amounts specified in this paragraph.

(4) The Secretary shall also, during December of 1972 and of each year thereafter, determine the monthly actuarial rate for disabled enrollees under age 65 which shall be applicable for the 12-month period commencing July 1 in the succeeding year. Such actuarial rate shall be the amount the Secretary estimates to be necessary so that the aggregate amount for such 12-month period with respect to disabled enrollees under age 65 will equal one-half of the total of the benefits and administrative costs which he estimates will be incurred in the Federal Supplementary Medical Insurance Trust Fund for such 12-month period with respect to such enrollees. In calculating the monthly actuarial rate under this paragraph, the Secretary shall include an appropriate amount for a contingency margin.

SEC. 1886.

(b)

(2) Paragraph (1) shall not apply to cost reporting periods of hospitals beginning on or after October 1, 1985.

(6)(A) The Secretary shall provide for an adjustment under this paragraph in the amount of payment otherwise provided a hospital under this subsection in the case of a hospital which, as of August 15, 1982, was subject to the taxes (hereinafter in this paragraph referred to as the "FICA taxes") imposed by section 3111 of the Internal Revenue Code of 1954 and which is not subject to such taxes for part or all of a cost reporting period beginning on or after October 1, 1982.

(B) In making such adjustment for a cost reporting period the Secretary shall estimate the amount of the operating costs of inpatient hospital services that would have resulted if the hospital was subject to the FICA taxes during that period. In

making such estimate the Secretary shall reduce the amount of such FICA taxes that would have been paid (but not below zero) by the amount of costs which the hospital demonstrates to the satisfaction of the Secretary were incurred in the period for pensions, health, and other fringe benefits for employees (and former employees and family members) comparable to, and in lieu of, the benefits provided under title II and this title of the Social Security Act.

(C) If a hospital's operating costs of inpatient hospital services estimated under subparagraph (B) is<sup>11</sup> greater than the hospital's operating costs of inpatient hospital services determined without regard to this paragraph for a cost reporting period, then the Secretary shall reduce the amount otherwise paid the hospital (respecting operating costs of inpatient hospital services) under this title (taking into account any limitation under subsection (a)) for the period by the amount by which—

(i) the amount that would have been paid the hospital if (I) the amount of the operating costs of inpatient hospital services estimated under subparagraph (B) were treated as the amount of the operating costs of inpatient hospital services and (II) subsection (a) did not apply to the determination, exceeds—

(ii) the amount that would otherwise have been paid the hospital if subsection (a) (and this paragraph) did not apply; except that, in making such determination for cost reporting periods beginning on or after October 1, 1984, clause (ii) of paragraph (1)(B) shall continue to apply.

**Provision Deemed to be in Social Security Act as in Effect Prior to  
June 13, 1983 (48 Federal Register 27151)  
[Cost-of-Living Increase]**

SEC. 215.

(a)

**TABLE 1.—TABLE FOR DETERMINING PRIMARY INSURANCE AMOUNT AND MAXIMUM  
FAMILY BENEFITS BEGINNING JUNE 1982<sup>1</sup>**

I (Primary insurance benefit under 1939 Act, as modified)		II (Primary insurance amount ef- fective for June 1980 <sup>2</sup> )	III (Average monthly wage)		IV (Primary insurance amount)	V (Maximum family ben- efits)
If an individual's primary insurance benefit (as deter- mined under subsec. (d)) is—		Or his pri- mary insur- ance amount (as determined under subsec. (c)) is—	Or his average monthly wage (as de- termined under sub- sec. (b)) is—		The amount referred to in the pre- ceding para- graphs of this sub- section shall be—	And the maximum amount of benefits payable (as provided in sec. 203(a)) on the basis of his wages and self- employ- ment in- come shall be—
At least—	But not more than—		At least—	But not more than—		
	\$16.20	\$170.30		\$76	\$182.90	\$274.40
\$16.21	16.84	173.00	\$77	78	185.80	278.70
16.85	17.60	177.10	79	80	190.20	285.30
17.61	18.40	180.20	81	81	193.50	290.50
18.41	19.24	183.40	82	83	196.90	295.50
19.25	20.00	187.30	84	85	201.10	301.90
20.01	20.64	190.90	86	87	205.00	307.50
20.65	21.28	193.80	88	89	208.10	312.20
21.29	21.88	197.70	90	90	212.30	318.50
21.89	22.28	201.10	91	92	215.90	324.00
22.29	22.68	204.30	93	94	219.40	329.10
22.69	23.08	207.70	95	96	223.00	334.60

<sup>11</sup>As in original. Should be "are".

## SUPERSEDED PROVISIONS—SOCIAL SECURITY ACT

356 48 FR 27151

337 03/86

I (Primary insurance benefit under 1939 Act, as modified)		II (Primary insurance amount ef- fective for June 1980 <sup>2</sup> )	III (Average monthly wage)		IV (Primary insurance amount)	V (Maximum family ben- efits)
If an individual's primary insurance benefit (as deter- mined under subsec. (d)) is—		Or his pri- mary insur- ance amount (as determined under sub- sec. (c)) is—	Or his average monthly wage (as de- termined under sub- sec. (b)) is—		The amount referred to in the pre- ceding para- graphs of this sub- section shall be—	And the maximum amount of benefits payable (as provided in sec. 203(a)) on the basis of his wages and self- employ- ment in- come shall be—
At least—	But not more than—		At least—	But not more than—		
23.09	23.44	211.40	97	97	227.00	340.60
23.45	23.76	214.90	98	99	230.80	346.20
23.77	24.20	219.10	100	101	235.30	353.00
24.21	24.60	222.10	102	102	238.50	357.90
24.61	25.00	225.80	103	104	242.50	363.70
25.01	25.48	230.00	105	106	247.00	370.60
25.49	25.92	233.80	107	107	251.10	376.70
25.93	26.40	237.40	108	109	254.90	382.40
26.41	26.94	241.10	110	113	258.90	388.40
26.95	27.46	244.50	114	118	262.50	393.90
27.47	28.00	248.20	119	122	266.50	399.80
28.01	28.68	252.10	123	127	270.70	406.10
28.69	29.25	255.80	128	132	274.70	412.00
29.26	29.68	259.30	133	136	278.40	417.70
29.69	30.36	262.80	137	141	282.20	423.40
30.37	30.92	266.60	142	146	286.30	429.40
30.93	31.36	270.60	147	150	290.60	435.90
31.37	32.00	273.70	151	155	293.90	440.90
32.01	32.60	277.70	156	160	298.20	447.40
32.61	33.20	281.40	161	164	302.20	453.30
33.21	33.88	284.90	165	169	305.90	459.00
33.89	34.50	288.80	170	174	310.10	465.30
34.51	35.00	292.30	175	178	313.90	470.90
35.01	35.80	296.20	179	183	318.10	477.10
35.81	36.40	299.70	184	188	321.80	482.80
36.41	37.08	303.60	189	193	326.00	489.20
37.09	37.60	307.30	194	197	330.00	495.10
37.61	38.20	310.90	198	202	333.90	500.90
38.21	39.12	315.00	203	207	338.30	507.40
39.13	39.68	318.60	208	211	342.10	513.30
39.69	40.33	321.50	212	216	345.20	517.90
40.34	41.12	325.60	217	221	349.60	524.50
41.13	41.76	329.30	222	225	353.60	530.50
41.77	42.44	333.30	226	230	357.90	537.00
42.45	43.20	336.90	231	235	361.80	542.90
43.21	43.76	341.00	236	239	366.20	549.40
43.77	44.44	344.20	240	244	369.60	556.90
44.45	44.88	347.50	245	249	373.20	568.50
44.89	45.60	351.90	250	253	377.90	577.70
		355.30	254	258	381.50	588.90
		358.40	259	263	384.90	600.10
		362.90	264	267	389.70	609.20
		366.20	268	272	393.20	620.80
		370.20	273	277	397.50	631.90
		373.70	278	281	401.30	641.00
		377.40	282	286	405.30	652.50
		381.40	287	291	409.60	664.10
		384.50	292	295	412.90	673.00



## SUPERSEDED PROVISIONS—SOCIAL SECURITY ACT

337 03/86 48 FR 27151 357

I (Primary insurance benefit under 1939 Act, as modified)		II (Primary insurance amount effective for June 1980 <sup>2</sup> )	III (Average monthly wage)		IV (Primary insurance amount)	V (Maximum family benefits)
If an individual's primary insurance benefit (as determined under subsec. (d)) is—		Or his primary insurance amount (as determined under subsec. (c)) is—	Or his average monthly wage (as determined under subsec. (b)) is—		The amount referred to in the preceding paragraphs of this subsection shall be—	And the maximum amount of benefits payable (as provided in sec. 203(a) on the basis of his wages and self-employment income shall be—
At least—	But not more than—		At least—	But not more than—		
		388.70	296	300	417.40	684.30
		392.30	301	305	421.30	696.00
		395.70	306	309	424.90	705.00
		399.70	310	314	429.20	716.30
		402.90	315	319	432.70	727.90
		406.70	320	323	436.70	736.90
		410.50	324	328	440.80	748.20
		413.90	329	333	444.50	759.60
		418.30	334	337	449.20	769.00
		421.20	338	342	452.30	780.10
		425.20	343	347	456.60	791.60
		429.20	348	351	460.90	800.60
		432.40	352	356	464.30	812.00
		436.60	357	361	468.90	823.50
		440.00	362	365	472.50	832.60
		443.40	366	370	476.20	844.00
		447.40	371	375	480.50	855.10
		451.20	376	379	484.50	864.60
		455.00	380	384	488.60	876.10
		458.30	385	389	492.20	887.30
		461.90	390	393	496.00	896.30
		466.00	394	398	500.40	908.00
		469.50	399	403	504.20	919.30
		473.50	404	407	508.50	928.20
		476.70	408	412	511.90	939.80
		480.00	413	417	515.50	951.00
		483.40	418	421	519.10	960.10
		487.30	422	426	523.30	971.60
		490.60	427	431	526.90	982.90
		493.60	432	436	530.10	994.40
		497.70	437	440	534.50	998.90
		500.80	441	445	537.80	1004.90
		504.20	446	450	541.50	1010.40
		507.90	451	454	545.40	1014.70
		511.30	455	459	549.10	1020.40
		514.60	460	464	552.60	1025.90
		517.80	465	468	556.10	1030.90
		521.90	469	473	560.50	1036.40
		524.80	474	478	563.60	1042.20
		528.20	479	482	567.20	1046.80
		531.90	483	487	571.20	1052.70
		535.40	488	492	575.00	1058.40
		538.60	493	496	578.40	1062.90
		542.50	497	501	582.60	1068.40
		545.60	502	506	585.90	1074.00
		548.90	507	510	589.50	1078.70
		552.40	511	515	593.20	1084.40
		556.20	516	520	597.30	1090.40

## SUPERSEDED PROVISIONS—SOCIAL SECURITY ACT

358 48 FR 27151

337 03/86

I (Primary insurance benefit under 1939 Act, as modified)		II (Primary insurance amount effective for June 1980 <sup>2</sup> )	III (Average monthly wage)		IV (Primary insurance amount)	V (Maximum family benefits)
If an individual's primary insurance benefit (as determined under subsec. (d)) is—		Or his primary insurance amount (as determined under subsec. (c)) is—	Or his average monthly wage (as determined under subsec. (b)) is—		The amount referred to in the preceding paragraphs of this subsection shall be—	And the maximum amount of benefits payable (as provided in sec. 203(a)) on the basis of his wages and self-employment income shall be—
At least—	But not more than—		At least—	But not more than—		
		559.40	521	524	600.70	1094.60
		562.60	525	529	604.20	1100.40
		566.70	530	534	608.60	1106.00
		569.60	535	538	611.70	1110.60
		573.20	539	543	615.60	1116.40
		576.70	544	548	619.30	1122.10
		580.30	549	553	623.20	1127.80
		583.50	554	556	626.60	1131.10
		586.30	557	560	629.60	1135.70
		589.50	561	563	633.10	1139.20
		592.50	564	567	636.30	1143.80
		596.00	568	570	640.10	1147.00
		598.80	571	574	643.10	1151.50
		601.80	575	577	646.30	1155.30
		604.60	578	581	649.30	1159.50
		607.80	582	584	652.70	1163.10
		610.40	585	588	655.50	1167.70
		614.10	589	591	659.50	1171.00
		617.10	592	595	662.70	1175.60
		620.10	596	598	665.90	1178.70
		623.10	599	602	669.20	1183.70
		626.10	603	605	672.40	1187.00
		629.10	606	609	675.60	1191.30
		632.40	610	612	679.10	1195.00
		635.30	613	616	682.30	1199.50
		638.30	617	620	685.50	1204.10
		641.50	621	623	688.90	1207.40
		644.30	624	627	691.90	1212.10
		647.50	628	630	695.40	1216.40
		650.50	631	634	698.60	1222.40
		653.70	635	637	702.00	1228.10
		656.80	638	641	705.40	1234.00
		659.70	642	644	708.50	1239.50
		662.80	645	648	711.80	1245.40
		665.70	649	652	714.90	1250.90
		667.70	653	656	717.10	1254.50
		669.60	657	660	719.10	1257.90
		671.90	661	665	721.60	1262.70
		674.30	666	670	724.10	1267.20
		676.80	671	675	726.80	1271.40
		679.30	676	680	729.50	1276.00
		681.50	681	685	731.90	1280.50
		684.20	686	690	734.80	1284.80
		686.40	691	695	737.10	1289.80
		688.60	696	700	739.50	1294.10
		691.20	701	705	742.30	1298.60
		693.60	706	710	744.90	1303.20
		696.20	711	715	747.70	1307.50

## SUPERSEDED PROVISIONS—SOCIAL SECURITY ACT

337

03/86

48 FR 27151

359

I (Primary insurance benefit under 1939 Act, as modified)		II (Primary insurance amount ef- fective for June 1980 <sup>2</sup> )	III (Average monthly wage)		IV (Primary insurance amount)	V (Maximum family ben- efits)
If an individual's primary insurance benefit (as deter- mined under subsec. (d)) is—		Or his pri- mary insur- ance amount (as determined under sub- sec. (c)) is—	Or his average monthly wage (as de- termined under sub- sec. (b)) is—		The amount referred to in the pre- ceding para- graphs of this sub- section shall be—	And the maximum amount of benefits payable (as provided in sec. 203(a)) on the basis of his wages and self- employ- ment in- come shall be—
At least—	But not more than—		At least—	But not more than—		
		698.50	716	720	750.10	1312.20
		700.90	721	725	752.70	1316.70
		703.40	726	730	755.40	1321.40
		705.70	731	735	757.90	1325.90
		708.20	736	740	760.60	1330.30
		710.50	741	745	763.00	1335.10
		712.60	746	750	765.30	1339.20
		715.00	751	755	767.90	1343.40
		717.10	756	760	770.10	1347.00
		719.10	761	765	772.30	1350.90
		720.80	766	770	774.10	1354.80
		723.00	771	775	776.50	1358.30
		725.00	776	780	778.60	1362.10
		727.10	781	785	780.90	1365.90
		728.90	786	790	782.80	1369.60
		730.90	791	795	784.90	1373.40
		733.00	796	800	787.20	1377.20
		735.10	801	805	789.40	1381.10
		737.10	806	810	791.60	1384.80
		739.10	811	815	793.70	1388.70
		741.10	816	820	795.90	1392.30
		743.10	821	825	798.00	1396.30
		745.10	826	830	800.20	1399.90
		747.10	831	835	802.30	1403.90
		749.00	836	840	804.40	1407.40
		751.10	841	845	806.60	1411.50
		752.90	846	850	808.60	1414.80
		755.20	851	855	811.00	1418.90
		757.10	856	860	813.10	1422.60
		759.10	861	865	815.20	1426.40
		761.20	866	870	817.50	1430.20
		763.20	871	875	819.60	1434.00
		765.10	876	880	821.70	1437.60
		767.20	881	885	823.90	1441.60
		769.00	886	890	825.90	1445.10
		771.10	891	895	828.10	1449.40
		773.10	896	900	830.30	1452.70
		775.30	901	905	832.60	1456.70
		777.20	906	910	834.70	1460.50
		779.30	911	915	836.90	1464.30
		781.50	916	920	839.30	1467.80
		783.20	921	925	841.10	1471.90
		785.10	926	930	843.10	1475.40
		787.10	931	935	845.30	1479.30
		789.20	936	940	847.60	1483.00
		791.20	941	945	849.70	1486.90
		793.20	946	950	851.80	1490.60
		795.40	951	955	854.20	1494.50



## SUPERSEDED PROVISIONS—SOCIAL SECURITY ACT

360 48 FR 27151

337 03/86

I (Primary insurance benefit under 1939 Act, as modified)		II (Primary insurance amount effective for June 1980 <sup>2</sup> )	III (Average monthly wage)		IV (Primary insurance amount)	V (Maximum family benefits)
If an individual's primary insurance benefit (as determined under subsec. (d)) is—		Or his primary insurance amount (as determined under subsec. (c)) is—	Or his average monthly wage (as determined under subsec. (b)) is—		The amount referred to in the preceding paragraphs of this subsection shall be—	And the maximum amount of benefits payable (as provided in sec. 203(a)) on the basis of his wages and self-employment income shall be—
At least—	But not more than—		At least—	But not more than—		
		797.60	956	960	856.60	1498.30
		799.60	961	965	858.70	1501.80
		801.10	966	970	860.80	1505.80
		803.20	971	975	862.60	1509.70
		805.20	976	980	864.70	1513.20
		807.50	981	985	867.20	1517.00
		809.30	986	990	869.10	1520.80
		811.30	991	995	871.30	1524.70
		813.50	996	1000	873.60	1528.30
		815.30	1001	1005	875.60	1531.50
		816.70	1006	1010	877.10	1535.10
		818.80	1011	1015	879.30	1538.30
		820.70	1016	1020	881.40	1542.10
		822.40	1021	1025	883.20	1545.20
		823.90	1026	1030	884.80	1548.70
		826.00	1031	1035	887.10	1552.10
		827.70	1036	1040	888.90	1555.40
		829.60	1041	1045	890.90	1559.10
		831.60	1046	1050	893.10	1562.30
		833.00	1051	1055	894.60	1565.30
		834.90	1056	1060	896.60	1569.20
		836.90	1061	1065	898.80	1572.40
		838.70	1066	1070	900.70	1575.90
		840.50	1071	1075	902.60	1579.40
		842.20	1076	1080	904.50	1582.70
		844.20	1081	1085	906.60	1586.00
		845.80	1086	1090	908.30	1589.40
		847.70	1091	1095	910.40	1592.90
		849.70	1096	1100	912.50	1596.50
		851.20	1101	1105	914.10	1599.60
		853.10	1106	1110	916.20	1603.10
		855.00	1111	1115	918.20	1606.30
		856.70	1116	1120	920.00	1610.00
		858.60	1121	1125	922.10	1613.20
		860.30	1126	1130	923.90	1616.70
		862.10	1131	1135	925.80	1619.90
		864.00	1136	1140	927.90	1623.60
		866.00	1141	1145	930.00	1627.00
		867.70	1146	1150	931.90	1630.30
		869.20	1151	1155	933.50	1633.50
		871.30	1156	1160	935.70	1637.00
		873.10	1161	1165	937.70	1640.50
		874.90	1166	1170	939.60	1644.00
		876.80	1171	1175	941.60	1647.40
		878.40	1176	1180	943.40	1650.80
		880.00	1181	1185	945.10	1653.70
		881.80	1186	1190	947.00	1656.80
		883.30	1191	1195	948.60	1660.10

## SUPERSEDED PROVISIONS—SOCIAL SECURITY ACT

337 03/86

48 FR 27151

361

I (Primary insurance benefit under 1939 Act, as modified)		II (Primary insurance amount effective for June 1980 <sup>2</sup> )	III (Average monthly wage)		IV (Primary insurance amount)	V (Maximum family benefits)
If an individual's primary insurance benefit (as determined under subsec. (d)) is—		Or his primary insurance amount (as determined under subsec. (c)) is—	Or his average monthly wage (as determined under subsec. (b)) is—		The amount referred to in the preceding paragraphs of this subsection shall be—	And the maximum amount of benefits payable (as provided in sec. 203(a)) on the basis of his wages and self-employment income shall be—
At least—	But not more than—		At least—	But not more than—		
		885.10	1196	1200	950.50	1663.30
		886.80	1201	1205	952.40	1666.30
		888.50	1206	1210	954.20	1669.70
		890.10	1211	1215	955.90	1672.70
		891.80	1216	1220	957.70	1675.80
		893.50	1221	1225	959.60	1678.80
		895.30	1226	1230	961.50	1682.20
		896.80	1231	1235	963.10	1685.20
		898.40	1236	1240	964.80	1688.50
		900.20	1241	1245	966.80	1691.70
		901.90	1246	1250	968.60	1694.80
		903.50	1251	1255	970.30	1697.80
		905.20	1256	1260	972.10	1701.10
		907.00	1261	1265	974.10	1704.30
		908.60	1266	1270	975.80	1707.40
		910.10	1271	1275	977.40	1710.30
		911.90	1276	1280	979.30	1713.70
		913.30	1281	1285	980.80	1716.50
		915.00	1286	1290	982.70	1719.50
		916.70	1291	1295	984.50	1722.40
		918.10	1296	1300	986.00	1725.40
		919.70	1301	1305	987.70	1728.30
		921.20	1306	1310	989.30	1731.30
		922.90	1311	1315	991.10	1734.20
		924.60	1316	1320	993.00	1737.30
		926.00	1321	1325	994.50	1740.00
		927.70	1326	1330	996.30	1743.30
		929.10	1331	1335	997.80	1746.20
		930.80	1336	1340	999.60	1749.20
		932.40	1341	1345	1001.30	1752.10
		933.80	1346	1350	1002.90	1755.00
		935.50	1351	1355	1004.70	1757.90
		937.00	1356	1360	1006.30	1760.90
		938.80	1361	1365	1008.20	1763.80
		940.10	1366	1370	1009.60	1766.80
		941.80	1371	1375	1011.40	1769.70
		943.40	1376	1380	1013.20	1772.70
		944.70	1381	1385	1014.60	1775.40
		946.30	1386	1390	1016.30	1778.30
		947.70	1391	1395	1017.80	1781.10
		949.10	1396	1400	1019.30	1783.90
		950.70	1401	1405	1021.00	1786.50
		952.10	1406	1410	1022.50	1789.40
		953.60	1411	1415	1024.10	1792.20
		955.10	1416	1420	1025.70	1795.10
		956.60	1421	1425	1027.30	1797.90
		958.00	1426	1430	1028.80	1800.70
		959.70	1431	1435	1030.70	1803.40

## SUPERSEDED PROVISIONS—SOCIAL SECURITY ACT

362 48 FR 27151

337 03/86

I (Primary insurance benefit under 1939 Act, as modified)		II (Primary insurance amount effective for June 1980 <sup>2</sup> )	III (Average monthly wage)		IV (Primary insurance amount)	V (Maximum family benefits)
If an individual's primary insurance benefit (as determined under subsec. (d)) is—		Or his primary insurance amount (as determined under subsec. (c)) is—	Or his average monthly wage (as determined under subsec. (b)) is—		The amount referred to in the preceding paragraphs of this subsection shall be—	And the maximum amount of benefits payable (as provided in sec. 203(a)) on the basis of his wages and self-employment income shall be—
At least—	But not more than—		At least—	But not more than—		
		961.20	1436	1440	1032.30	1806.20
		962.60	1441	1445	1033.80	1808.90
		964.20	1446	1450	1035.50	1812.00
		965.60	1451	1455	1037.00	1814.60
		967.00	1456	1460	1038.50	1817.50
		968.60	1461	1465	1040.20	1820.20
		970.00	1466	1470	1041.70	1823.00
		971.50	1471	1475	1043.30	1825.80
		972.90	1476	1480	1044.80	1828.40
		974.40	1481	1485	1046.50	1831.20
		975.70	1486	1490	1047.90	1833.60
		977.20	1491	1495	1049.50	1836.40
		978.50	1496	1500	1050.90	1839.00
		979.90	1501	1505	1052.40	1841.80
		981.30	1506	1510	1053.90	1844.10
		982.70	1511	1515	1055.40	1846.80
		984.20	1516	1520	1057.00	1849.50
		985.50	1521	1525	1058.40	1852.30
		986.90	1526	1530	1059.90	1854.60
		988.30	1531	1535	1061.40	1857.30
		989.70	1536	1540	1062.90	1860.00
		991.10	1541	1545	1064.40	1862.70
		992.50	1546	1550	1065.90	1865.20
		994.00	1551	1555	1067.50	1867.90
		995.30	1556	1560	1068.90	1870.50
		996.70	1561	1565	1070.40	1873.20
		998.10	1566	1570	1071.90	1875.60
		999.50	1571	1575	1073.40	1878.40
		1000.80	1576	1580	1074.80	1881.00
		1002.30	1581	1585	1076.40	1883.60
		1003.70	1586	1590	1077.90	1886.10
		1005.10	1591	1595	1079.40	1888.90
		1006.50	1596	1600	1080.90	1891.50
		1007.90	1601	1605	1082.40	1894.20
		1009.30	1606	1610	1083.90	1896.60
		1010.60	1611	1615	1085.30	1899.40
		1012.10	1616	1620	1086.90	1902.00
		1013.50	1621	1625	1088.40	1904.70
		1014.90	1626	1630	1090.00	1907.20
		1016.30	1631	1635	1091.50	1910.00
		1017.60	1636	1640	1092.90	1912.40
		1019.10	1641	1645	1094.50	1915.20
		1020.50	1646	1650	1096.00	1917.70
		1021.90	1651	1655	1097.50	1920.40
		1023.30	1656	1660	1099.00	1922.90
		1024.60	1661	1665	1100.40	1925.60
		1026.10	1666	1670	1102.00	1928.20
		1027.40	1671	1675	1103.40	1930.90



## SUPERSEDED PROVISIONS—SOCIAL SECURITY ACT

337 03/86

48 FR 27151

363

I (Primary insurance benefit under 1939 Act, as modified)		II (Primary insurance amount ef- fective for June 1980 <sup>2</sup> )	III (Average monthly wage)		IV (Primary insurance amount)	V (Maximum family ben- efits)
If an individual's primary insurance benefit (as deter- mined under subsec. (d)) is—		Or his pri- mary insur- ance amount (as determined under sub- sec. (c)) is—	Or his average monthly wage (as de- termined under sub- sec. (b)) is—		The amount referred to in the pre- ceding para- graphs of this sub- section shall be—	And the maximum amount of benefits payable (as provided in sec. 203(a)) on the basis of his wages and self- employ- ment in- come shall be—
At least—	But not more than—		At least—	But not more than—		
		1028.90	1676	1680	1105.00	1933.50
		1030.30	1681	1685	1106.50	1936.20
		1031.70	1686	1690	1108.00	1938.70
		1033.10	1691	1695	1109.50	1941.40
		1034.30	1696	1700	1110.80	1944.00
		1035.80	1701	1705	1112.40	1946.70
		1037.10	1706	1710	1113.80	1949.20
		1038.50	1711	1715	1115.30	1951.80
		1039.90	1716	1720	1116.80	1954.40
		1041.30	1721	1725	1118.30	1957.20
		1042.80	1726	1730	1119.90	1959.70
		1044.10	1731	1735	1121.30	1962.40
		1045.60	1736	1740	1122.90	1964.90
		1046.90	1741	1745	1124.30	1967.70
		1048.30	1746	1750	1125.80	1970.20
		1049.70	1751	1755	1127.30	1972.90
		1051.10	1756	1760	1128.80	1975.50
		1052.60	1761	1765	1130.40	1978.30
		1053.90	1766	1770	1131.80	1980.60
		1055.30	1771	1775	1133.30	1983.30
		1056.70	1776	1780	1134.80	1986.00
		1058.10	1781	1785	1136.30	1988.80
		1059.50	1786	1790	1137.90	1991.10
		1060.90	1791	1795	1139.40	1993.80
		1062.30	1796	1800	1140.90	1996.50
		1063.70	1801	1805	1142.40	1999.20
		1065.10	1806	1810	1143.90	2001.70
		1066.50	1811	1815	1145.40	2004.40
		1067.90	1816	1820	1146.90	2007.00
		1069.20	1821	1825	1148.30	2009.70
		1070.70	1826	1830	1149.90	2012.10
		1072.10	1831	1835	1151.40	2014.90
		1073.50	1836	1840	1152.90	2017.60
		1074.90	1841	1845	1154.40	2020.30
		1076.20	1846	1850	1155.80	2022.60
		1077.70	1851	1855	1157.40	2025.40
		1079.00	1856	1860	1158.80	2028.00
		1080.50	1861	1865	1160.40	2030.70
		1081.90	1866	1870	1161.90	2033.10
		1083.20	1871	1875	1163.30	2035.90
		1084.70	1876	1880	1164.90	2038.50
		1086.00	1881	1885	1166.30	2041.20
		1087.50	1886	1890	1167.90	2043.70
		1088.80	1891	1895	1169.30	2046.50
		1090.30	1896	1900	1170.90	2049.00
		1091.70	1901	1905	1172.40	2051.70
		1093.00	1906	1910	1173.80	2054.20
		1094.40	1911	1915	1175.30	2056.70

## SUPERSEDED PROVISIONS—SOCIAL SECURITY ACT

364 48 FR 27151

337 03/86

I (Primary insurance benefit under 1939 Act, as modified)		II (Primary insurance amount ef- fective for June 1980 <sup>2</sup> )	III (Average monthly wage)		IV (Primary insurance amount)	V (Maximum family ben- efits)
If an individual's primary insurance benefit (as deter- mined under subsec. (d)) is—		Or his pri- mary insur- ance amount (as determined under sub- sec. (c)) is—	Or his average monthly wage (as de- termined under sub- sec. (b)) is—		The amount referred to in the pre- ceding para- graphs of this sub- section shall be—	And the maximum amount of benefits payable (as provided in sec. 203(a)) on the basis of his wages and self- employ- ment in- come shall be—
At least—	But not more than—		At least—	But not more than—		
		1095.60	1916	1920	1176.60	2059.20
		1096.80	1921	1925	1177.90	2061.50
		1098.10	1926	1930	1179.30	2064.00
		1099.40	1931	1935	1180.70	2066.20
		1100.70	1936	1940	1182.10	2068.80
		1101.90	1941	1945	1183.40	2071.10
		1103.30	1946	1950	1184.90	2073.50
		1104.50	1951	1955	1186.20	2075.80
		1105.70	1956	1960	1187.50	2078.40
		1107.00	1961	1965	1188.90	2080.60
		1108.30	1966	1970	1190.30	2083.10
		1109.60	1971	1975	1191.70	2085.30
		1110.80	1976	1980	1192.90	2087.80
		1112.20	1981	1985	1194.50	2090.20
		1113.40	1986	1990	1195.70	2092.60
		1114.60	1991	1995	1197.00	2094.90
		1115.90	1996	2000	1198.40	2097.40
		1117.20	2001	2005	1199.80	2099.70
		1118.50	2006	2010	1201.20	2102.20
		1119.70	2011	2015	1202.50	2104.50
		1121.10	2016	2020	1204.00	2106.90
		1122.30	2021	2025	1205.30	2109.30
		1123.50	2026	2030	1206.60	2111.80
		1124.80	2031	2035	1208.00	2114.00
		1126.10	2036	2040	1209.40	2116.50
		1127.40	2041	2045	1210.80	2118.70
		1128.60	2046	2050	1212.10	2121.30
		1130.00	2051	2055	1213.60	2123.60
		1131.20	2056	2060	1214.90	2126.00
		1132.40	2061	2065	1216.10	2128.30
		1133.70	2066	2070	1217.50	2130.90
		1135.00	2071	2075	1218.90	2133.10
		1136.30	2076	2080	1220.30	2135.60
		1137.50	2081	2085	1221.60	2137.90
		1138.80	2086	2090	1223.00	2140.40
		1140.10	2091	2095	1224.40	2142.70
		1141.30	2096	2100	1225.70	2145.20
		1142.60	2101	2105	1227.10	2147.40
		1143.90	2106	2110	1228.50	2150.00
		1145.20	2111	2115	1229.90	2152.20
		1146.40	2116	2120	1231.20	2154.70
		1147.70	2121	2125	1232.60	2157.00
		1149.00	2126	2130	1234.00	2159.50
		1150.30	2131	2135	1235.40	2161.80
		1151.50	2136	2140	1236.70	2164.30
		1152.70	2141	2145	1237.90	2166.50
		1154.10	2146	2150	1239.50	2169.10
		1155.30	2151	2155	1240.70	2171.40

## SUPERSEDED PROVISIONS—SOCIAL SECURITY ACT

337 03/86

48 FR 27151

365

I (Primary insurance benefit under 1939 Act, as modified)		II (Primary insurance amount ef- fective for June 1980 <sup>2</sup> )	III (Average monthly wage)		IV (Primary insurance amount)	V (Maximum family ben- efits)
If an individual's primary insurance benefit (as deter- mined under subsec. (d)) is—		Or his pri- mary insur- ance amount (as determined under sub- sec. (c)) is—	Or his average monthly wage (as de- termined under sub- sec. (b)) is—		The amount referred to in the pre- ceding para- graphs of this sub- section shall be—	And the maximum amount of benefits payable (as provided in sec. 203(a)) on the basis of his wages and self- employ- ment in- come shall be—
At least—	But not more than—		At least—	But not more than—		
		1156.60	2156	2160	1242.10	2173.80
		1157.80	2161	2165	1243.40	2176.00
		1158.90	2166	2170	1244.60	2178.00
		1160.00	2171	2175	1245.80	2180.20
		1161.10	2176	2180	1247.00	2182.20
		1162.20	2181	2185	1248.20	2184.40
		1163.30	2186	2190	1249.30	2186.40
		1164.40	2191	2195	1250.50	2188.50
		1165.50	2196	2200	1251.70	2190.60
		1166.60	2201	2205	1252.90	2192.70
		1167.80	2206	2210	1254.20	2194.80
		1168.90	2211	2215	1255.30	2196.90
		1170.00	2216	2220	1256.50	2199.00
		1171.10	2221	2225	1257.70	2201.10
		1172.20	2226	2230	1258.90	2203.20
		1173.30	2231	2235	1260.10	2205.30
		1174.40	2236	2240	1261.30	2207.20
		1175.50	2241	2245	1262.40	2209.40
		1176.70	2246	2250	1263.70	2211.40
		1177.80	2251	2255	1264.90	2213.60
		1178.90	2256	2260	1266.10	2215.60
		1180.00	2261	2265	1267.30	2217.80
		1181.10	2266	2270	1268.50	2219.80
		1182.20	2271	2275	1269.60	2221.90
		1183.30	2276	2280	1270.80	2224.00
		1184.40	2281	2285	1272.00	2226.10
		1185.60	2286	2290	1273.30	2228.20
		1186.70	2291	2295	1274.50	2230.30
		1187.80	2296	2300	1275.60	2232.40
		1188.90	2301	2305	1276.80	2234.50
		1190.00	2306	2310	1278.00	2236.60
		1191.10	2311	2315	1279.20	2238.70
		1192.20	2316	2320	1280.40	2240.70
		1193.30	2321	2325	1281.60	2242.90
		1194.40	2326	2330	1282.70	2244.90
		1195.60	2331	2335	1284.00	2247.10
		1196.70	2336	2340	1285.20	2249.10
		1197.80	2341	2345	1286.40	2251.30
		1198.90	2346	2350	1287.60	2253.30
		1200.00	2351	2355	1288.80	2255.50
		1201.10	2356	2360	1289.90	2257.50
		1202.20	2361	2365	1291.10	2259.60
		1203.30	2366	2370	1292.30	2261.60
		1204.50	2371	2375	1293.60	2263.70
		1205.60	2376	2380	1294.80	2265.80
		1206.70	2381	2385	1295.90	2267.90
		1207.80	2386	2390	1297.10	2270.00
		1208.90	2391	2395	1298.30	2272.10



## SUPERSEDED PROVISIONS—SOCIAL SECURITY ACT

366 48 FR 27151

337 03/86

I (Primary insurance benefit under 1939 Act, as modified)		II (Primary insurance amount effective for June 1980 <sup>2</sup> )	III (Average monthly wage)		IV (Primary insurance amount)	V (Maximum family benefits)
If an individual's primary insurance benefit (as determined under subsec. (d)) is—		Or his primary insurance amount (as determined under subsec. (c)) is—	Or his average monthly wage (as determined under subsec. (b)) is—		The amount referred to in the preceding paragraphs of this subsection shall be—	And the maximum amount of benefits payable (as provided in sec. 203(a)) on the basis of his wages and self-employment income shall be—
At least—	But not more than—		At least—	But not more than—		
		1210.00	2396	2400	1299.50	2274.10
		1211.10	2401	2405	1300.70	2276.30
		1212.20	2406	2410	1301.90	2278.30
		1213.40	2411	2415	1303.10	2280.50
		1214.50	2416	2420	1304.30	2282.50
		1215.60	2421	2425	1305.50	2284.70
		1216.70	2426	2430	1306.70	2286.70
		1217.80	2431	2435	1307.90	2288.90
		1218.90	2436	2440	1309.00	2290.90
		1220.00	2441	2445	1310.20	2293.00
		1221.10	2446	2450	1311.40	2295.10
		1222.20	2451	2455	1312.60	2297.20
		1223.40	2456	2460	1313.90	2299.30
		1224.50	2461	2465	1315.10	2301.40
		1225.60	2466	2470	1316.20	2303.50
		1226.70	2471	2475	1317.40	2305.60
		1227.70	2476	2480	1318.50	2307.40
		1228.70	2481	2485	1319.60	2309.40
		1229.70	2486	2490	1320.60	2311.20
		1230.70	2491	2495	1321.70	2313.10
		1231.70	2496	2500	1322.80	2315.00
		1232.70	2501	2505	1323.90	2316.90
		1233.70	2506	2510	1324.90	2318.70
		1234.70	2511	2515	1326.00	2320.60
		1235.70	2516	2520	1327.10	2322.50
		1236.70	2521	2525	1328.20	2324.40
		1237.70	2526	2530	1329.20	2326.20
		1238.70	2531	2535	1330.30	2328.20
		1239.70	2536	2540	1331.40	2330.00
		1240.70	2541	2545	1332.50	2331.90
		1241.70	2546	2550	1333.50	2333.80
		1242.70	2551	2555	1334.60	2335.70
		1243.70	2556	2560	1335.70	2337.50
		1244.70	2561	2565	1336.80	2339.40
		1245.70	2566	2570	1337.80	2341.30
		1246.70	2571	2575	1338.90	2343.20
		1247.70	2576	2580	1340.00	2345.00
		1248.70	2581	2585	1341.10	2347.00
		1249.70	2586	2590	1342.10	2348.80
		1250.70	2591	2595	1343.20	2350.70
		1251.70	2596	2600	1344.30	2352.50
		1252.70	2601	2605	1345.30	2354.50
		1253.70	2606	2610	1346.40	2356.30
		1254.70	2611	2615	1347.50	2358.20
		1255.70	2616	2620	1348.60	2360.10
		1256.70	2621	2625	1349.60	2362.00
		1257.70	2626	2630	1350.70	2363.80
		1258.70	2631	2635	1351.80	2365.80

## SUPERSEDED PROVISIONS—SOCIAL SECURITY ACT

337 03/86

48 FR 27151

367

I (Primary insurance benefit under 1939 Act, as modified)		II (Primary insurance amount effective for June 1980 <sup>2</sup> )	III (Average monthly wage)		IV (Primary insurance amount)	V (Maximum family benefits)
If an individual's primary insurance benefit (as determined under subsec. (d)) is—		Or his primary insurance amount (as determined under subsec. (c)) is—	Or his average monthly wage (as determined under subsec. (b)) is—		The amount referred to in the preceding paragraphs of this subsection shall be—	And the maximum amount of benefits payable (as provided in sec. 203(a)) on the basis of his wages and self-employment income shall be—
At least—	But not more than—		At least—	But not more than—		
		1259.70	2636	2640	1352.90	2367.60
		1260.70	2641	2645	1353.90	2369.50
		1261.70	2646	2650	1355.00	2371.30
		1262.70	2651	2655	1356.10	2373.30
		1263.70	2656	2660	1357.20	2375.10
		1264.70	2661	2665	1358.20	2377.00
		1265.70	2666	2670	1359.30	2378.90
		1266.70	2671	2675	1360.40	2380.80
		1267.70	2676	2680	1361.50	2382.60
		1268.70	2681	2685	1362.50	2384.60
		1269.70	2686	2690	1363.60	2386.40
		1270.70	2691	2695	1364.70	2388.30
		1271.70	2696	2700	1365.80	2390.10

<sup>1</sup>This revised table of benefits was published in the Federal Register on May 14, 1982 (47 FR 20863), as required by P.L. 93-66, §203(f), which reads as follows:

"(f) Effective June 1, 1974, the Secretary of Health, Education, and Welfare, shall prescribe and publish in the Federal Register such modifications and extensions in the table contained in section 215(a) of the Social Security Act (which shall be determined in the same manner as the revisions in such table provided for under section 215(i)(2)(D) of such Act) as may be necessary to reflect the amendments made by this section; and such modified and extended table shall be deemed to be the table appearing in such section 215(a)."

This table was effective through November 1983. For the table effective beginning December 1983, see p. 381.

<sup>2</sup>As published in Federal Register of May 14, 1982. Date should be June 1981.

TABLE 2.—TABLE FOR DETERMINING PRIMARY INSURANCE AMOUNT AND MAXIMUM FAMILY BENEFITS UNDER SUBPARAGRAPH (C)(i)(II) OF SUBSECTION 215(a)(1) BEGINNING JUNE 1982

I (Years of coverage)	II (Primary insurance amount)	III (Maximum family benefits)
If an individual's years of coverage (as determined under sec. 215(a)(1)(C)(ii)) are—	The amount referred to in sec. 215(a)(1)(C)(i)(II) shall be—	And the maximum amount of benefits payable (as provided in sec. 215(i)(2)(D)) on the basis of his or her wages and self-employment income shall be—
11	17.50	26.30
12	34.60	52.00
13	51.90	78.00
14	69.10	103.80
15	86.30	129.60
16	103.70	155.60
17	120.90	181.30
18	138.20	207.30
19	155.40	233.10
20	172.50	258.90
21	189.90	285.00
22	207.10	310.80
23	224.50	336.90
24	241.70	362.60
25	258.90	388.40
26	276.30	414.50
27	293.50	440.30
28	310.70	466.10
29	327.90	491.90
30	345.10	517.70

Provision Deemed to be in Social Security Act as in Effect Prior to  
P.L. 98-90, Approved August 29, 1983 (97 Stat. 606)  
[Social Security Act—Title XVIII Amendments—1983]

SEC. 1814.

(i)

(2)

(B) For purposes of subparagraph (A), the “cap amount” for a region for a year is computed as follows:

(i) The Secretary, using records of the program under this title, shall identify individuals (or a representative sample of such individuals)—

(I) who died during the base period (as defined in clause (v)),

(II) with respect to whom the primary cause of death was cancer, and

(III) who, during the six-month period preceding death, were provided benefits under this title.

(ii) The Secretary shall determine a national average medicare per capita expenditure amount by (I) determining (or estimating) the amount of payments made under this title with respect to services provided to individuals identified in clause (i) during the six months before death, and (II) dividing such amount of payments by the number of such individuals.

(iii) The Secretary, using the best available data, shall then compute a regional average medicare per capita expenditure amount for each region, by adjusting the national average medicare per capita expenditure amount (computed under clause (ii)) to reflect the relative difference between that region's average cost of delivering health care and the national average cost of delivering health care.

(iv) The “cap amount” for a region for an accounting year is 40 percent of the regional average determined under clause (iii) for that region, increased or decreased by the same percentage as the percentage increase or decrease, respectively, in the medical care expenditure category of the consumer price index for all urban consumers (U.S. city average), published by the Bureau of Labor



# SUPERSEDED PROVISIONS—SOCIAL SECURITY ACT

337 03/86

48 FR 50414 369

Statistics, from the fourth month of the base period to the fifth month of the accounting year.

(v) For purposes of this subparagraph, the term "base period" means the most recent period of 12 months (ending before the date proposed regulations are first issued to carry out this paragraph) for which the Secretary determines he has sufficient data to make the determinations required under clause (i) through (iii).

## Provision Deemed to be in Social Security Act as in Effect Prior to P.L. 98-135, Approved October 24, 1983 (97 Stat. 857)

### Federal Supplemental Compensation Amendments of 1983

SEC. 2003.

(c)

- (3) \$2,500,000,000 for the fiscal year 1984;
- (4) \$2,600,000,000 for the fiscal year 1985; and
- (5) \$2,700,000,000 for the fiscal year 1986 or any succeeding fiscal year.

## Provision Deemed to be in Social Security Act as in Effect Prior to November 1, 1983 (48 Federal Register 50414)

### 【Cost-of-Living Increase; Extension】

SEC. 215.

(a)

TABLE FOR DETERMINING PRIMARY INSURANCE AMOUNT AND MAXIMUM FAMILY BENEFITS BEGINNING JANUARY 1983<sup>1</sup>

I (Primary insurance benefit under 1939 Act, as modified)		II (Primary insurance amount effective for June 1981)		III (Average monthly wage)		IV (Primary insurance amount)	V (Maximum family benefits)
If an individual's primary insurance benefit (as determined under subsec. (d)) is—		Or his primary insurance amount (as determined under subsec. (c)) is—		Or his average monthly wage (as determined under subsec. (b)) is—		The amount referred to in the preceding paragraphs of this subsection shall be—	And the maximum amount of benefits payable (as provided in sec. 203(a)) on the basis of his wages and self-employment income shall be—
At least—	But not more than—			At least—	But not more than—		
				2701	2705	1366.80	2391.90
				2706	2710	1367.80	2393.60
				2711	2715	1368.80	2395.40
				2716	2720	1369.80	2397.10
				2721	2725	1370.80	2398.90
				2726	2730	1371.80	2400.60
				2731	2735	1372.80	2402.40
				2736	2740	1373.80	2404.10
				2741	2745	1374.80	2405.90
				2746	2750	1375.80	2407.60
				2751	2755	1376.80	2409.40
				2756	2760	1377.80	2411.10
				2761	2765	1378.80	2412.90
				2766	2770	1379.80	2414.60
				2771	2775	1380.80	2416.40
				2776	2780	1381.80	2418.10
				2781	2785	1382.80	2419.90
				2786	2790	1383.80	2421.60
				2791	2795	1384.80	2423.40

## SUPERSEDED PROVISIONS—SOCIAL SECURITY ACT

370 48 FR 50414

337 03/86

I (Primary insurance benefit under 1939 Act, as modified)		II (Primary insurance amount ef- fective for June 1981)	III (Average monthly wage)		IV (Primary insurance amount)	V (Maximum family ben- efits)
If an individual's primary insurance benefit (as deter- mined under subsec. (d)) is—		Or his pri- mary insur- ance amount (as determined under sub- sec. (c)) is—	Or his average monthly wage (as de- termined under sub- sec. (b)) is—		The amount referred to in the pre- ceding para- graphs of this sub- section shall be—	And the maximum amount of benefits payable (as provided in sec. 203(a)) on the basis of his wages and self- employ- ment in- come shall be—
At least—	But not more than—		At least—	But not more than—		
			2796	2800	1385.80	2425.10
			2801	2805	1386.80	2426.90
			2806	2810	1387.80	2428.60
			2811	2815	1388.80	2430.40
			2816	2820	1389.80	2432.10
			2821	2825	1390.80	2433.90
			2826	2830	1391.80	2435.60
			2831	2835	1392.80	2437.40
			2836	2840	1393.80	2439.10
			2841	2845	1394.80	2440.90
			2846	2850	1395.80	2442.60
			2851	2855	1396.80	2444.40
			2856	2860	1397.80	2446.10
			2861	2865	1398.80	2447.90
			2866	2870	1399.80	2449.60
			2871	2875	1400.80	2451.40
			2876	2880	1401.80	2453.10
			2881	2885	1402.80	2454.90
			2886	2890	1403.80	2456.60
			2891	2895	1404.80	2458.40
			2896	2900	1405.80	2460.10
			2901	2905	1406.80	2461.90
			2906	2910	1407.80	2463.60
			2911	2915	1408.80	2465.40
			2916	2920	1409.80	2467.10
			2921	2925	1410.80	2468.90
			2926	2930	1411.80	2470.60
			2931	2935	1412.80	2472.40
			2936	2940	1413.80	2474.10
			2941	2945	1414.80	2475.90
			2946	2950	1415.80	2477.60
			2951	2955	1416.80	2479.40
			2956	2960	1417.80	2481.10
			2961	2965	1418.80	2482.90
			2966	2970	1419.80	2484.60
			2971	2975	1420.80	2486.40

<sup>1</sup>This extension was published at 47 FR 51003 on November 10, 1982. This data was published as required by Social Security Act §215(a)(5) and §215(i)(2)(D).

**Provisions of the Social Security Act as in Effect Prior to  
P.L. 98-369, Approved July 18, 1984 (98 Stat. 494)  
Deficit Reduction Act of 1984**

**SEC. 202.**

(d)(1)

(G)

(III) the first month during no part of which he is a full-time elementary or secondary school student, or

(IV) the month in which he attains the age of 19,

**[SEC. 205. (r)]****USE OF DEATH CERTIFICATES TO CORRECT PROGRAM INFORMATION****SEC. 210.**

(a)

(1)(A) under contracts entered into in accordance with title V of the Agricultural Act of 1949, as amended, or

(5)

(B) is performed by an individual who (i) has been continuously in the employ of the United States or an instrumentality thereof since December 31, 1983 (and for this purpose an individual who returns to the performance of such service after being separated therefrom following a previous period of such service shall nevertheless be considered upon such return as having been continuously in the employ of the United States or an instrumentality thereof, regardless of whether the period of such separation began before, on, or after December 31, 1983, if the period of such separation does not exceed 365 consecutive days), or (ii) is receiving an annuity from the Civil Service Retirement and Disability Fund, or benefits (for service as an employee) under another retirement system established by a law of the United States for employees of the Federal Government (other than for members of the uniformed services);

(G)<sup>1</sup> any other service in the legislative branch of the Federal Government if such service is performed by an individual who, on December 31, 1983, is not subject to subchapter III of chapter 83 of title 5, United States Code;

**SEC. 215.**

(i)

(5)

(B)

(iii) multiplying such quotient by 100 and rounding to the nearest one-tenth of 1 percent,

**SEC. 402. (a)**

(25) provide (A) that, as a condition of eligibility under the plan, each applicant for or recipient of aid shall furnish to the State agency his social security account number (or numbers, if he has more than one such number), and (B) that such State agency shall utilize such account numbers, in addition to any other means of identification it may determine to employ in the administration of such plan;

(29) effective October 1, 1979, provide that wage information available from the Social Security Administration under the provisions of section 411 of this Act, and wage information available (under the provisions of section 3304(a)(16) of the Federal Unemployment Tax Act) from agencies administering State unemployment compensation laws, shall be requested and utilized to the extent permitted under the provisions of such sections; except that the State shall not be required to request such information from the Social Security Administration where such information is available from the agency administering the State unemployment compensation laws;

(36) provide, at the option of the State, that in making the determination for any month under paragraph (7) the State agency shall not include as income any support or maintenance assistance furnished to or on behalf of the family which (as determined under regulations of the Secretary by such State agency as the chief executive officer of the State may designate) is based on need for such support and maintenance, including assistance received to assist in meeting the costs of home energy (including both heating and cooling), and which is (i) assistance furnished in kind by a private nonprofit agency, or (ii) assistance furnished by a supplier of home heating oil or gas, by an entity whose revenues

<sup>1</sup>P.L. 98-369, §2601(a)(2)(A), redesignated clause (v) as subparagraph (G), effective with respect to service performed after December 31, 1983, except as provided in §2601(d) of P.L. 98-369.



are primarily derived on a rate-of-return basis regulated by a State or Federal governmental entity, or by a municipal utility providing home energy;<sup>2</sup>

(d) (1) For purposes of this part, an individual's "income" shall also include, to the extent and under the circumstances prescribed by the Secretary, an amount (which shall be treated as earned income for purposes of this part) equal to the earned income advance amount (under section 3507(a) of the Internal Revenue Code of 1954) that is (or, upon the filing of an earned income eligibility certificate, would be) payable to such individual.

SEC. 406.

(b)(2)

(D) aid in the form of foster home care in behalf of children described in section 408(a); and

(g)

(2) Notwithstanding paragraph (1), a State may provide that for purposes of title XIX a pregnant woman shall be deemed to be a recipient of aid to families with dependent children under this part if she would be eligible for such aid if such child had been born and was living with her in the month of payment, and such pregnancy has been medically verified.

#### ACCESS TO WAGE INFORMATION

SEC. 411. (a) Notwithstanding any other provision of law, the Secretary shall make available to States and political subdivisions thereof wage information contained in the records of the Social Security Administration which is necessary (as determined by the Secretary in regulations) for purposes of determining an individual's eligibility for aid or services, or the amount of such aid or services, under a State plan for aid and services to needy families with children approved under this part, and which is specifically requested by such State or political subdivision for such purposes.

(b) The Secretary shall establish such safeguards as are necessary (as determined by the Secretary under regulations) to insure that information made available under the provisions of this section is used only for the purposes authorized by this section.

SEC. 414.

(c)

(3)

(C) a job position provided to an eligible individual by a proprietary entity involving the provision of child day care services for which all or part of the wages are paid by such State or local agency, but only if such entity does not claim a credit for any part of the wages paid to such eligible individual under section 40 of the Internal Revenue Code of 1954 (relating to credit for expenses of the work incentive program) or section 44B of such Code (relating to credit for employment of certain new employees).

(d) The amount of the Federal payment to a State under section 403 for any quarter for expenditures incurred in operating a work supplementation program shall not exceed an amount equal to the difference between—

(1) the amount which would have been paid under section 403 to such State for such quarter under the State plan if it did not have a work supplementation program in effect and had not altered its State plan accordingly, as such State plan was in effect in May 1981, or as modified thereafter as required by Federal law; and

(2) the amount paid to such State under section 403 for such quarter exclusive of the amount so paid for such quarter for the work supplementation program.

SEC. 1108.

(c) The total amount certified by the Secretary under title XIX with respect to a fiscal year for payment to—

(1) Puerto Rico shall not exceed \$45,000,000,

(2) the Virgin Islands shall not exceed \$1,500,000,

(3) Guam shall not exceed \$1,400,000,

(4) the Northern Mariana Islands shall not exceed \$350,000, and

(5) American Samoa shall not exceed \$750,000.

<sup>2</sup>P.L. 98-369, §2624(a)(2), struck out the period and substituted "; and".

P.L. 98-369, §2639(c)(2), repealed section 404 of P.L. 98-21, which struck out "assistance received to assist in meeting the costs of home energy, including both heating and cooling, which (as determined under regulations of the Secretary by such State agency as the chief executive officer of the State may designate) (A) is based on need for such assistance, and (B)" and substituted "support or maintenance assistance furnished to or on behalf of the family which (as determined under regulations of the Secretary by such State agency as the chief executive officer of the State may designate) is based on need for such support and maintenance, including assistance received to assist in meeting the costs of home energy (including both heating and cooling), and which".

P.L. 98-369, §2639(c)(1), struck out section 545 of P.L. 97-424, which added paragraph (36).

P.L. 98-369, §2640(a)(1), struck out "and".

# SUPERSEDED PROVISIONS—SOCIAL SECURITY ACT

337 03/86

P.L. 98-369 §1303.

373

## ADJUSTMENT OF RETROACTIVE BENEFITS UNDER TITLE II ON ACCOUNT OF SUPPLEMENTAL SECURITY INCOME BENEFITS

SEC. 1127. Notwithstanding any other provision of this Act, in any case where an individual—

(1) makes application for benefits under title II and is subsequently determined to be entitled to those benefits, and

(2) was an individual with respect to whom supplemental security income benefits were paid under title XVI (including State supplementary payments which were made under an agreement pursuant to section 1616(a) or an administration agreement under section 212 of Public Law 93-66) for one or more months during the period beginning with the first month for which a benefit described in paragraph (1) is payable and ending with the month before the first month in which such benefit is paid pursuant to the application referred to in paragraph (1), the benefits (described in paragraph (1)) which are otherwise retroactively payable to such individual for months in the period described in paragraph (2) shall be reduced by an amount equal to so much of such supplemental security income benefits (including State supplementary payments) described in paragraph (2) for such month or months as would not have been paid with respect to such individual or his eligible spouse if the individual had received the benefits under title II at the times they were regularly due during such period rather than retroactively; and from the amount of such reduction the Secretary shall reimburse the State on behalf of which such supplementary payments were made for the amount (if any) by which such State's expenditures on account of such supplementary payments for the period involved exceeded the expenditures which the State would have made (for such period) if the individual had received the benefits under title II at the times they were regularly due during such period rather than retroactively. An amount equal to the portion of such reduction remaining after reimbursement of the State under the preceding sentence shall be covered into the general fund of the Treasury.

SEC. 1153.

(b)

(2)

(C) The twelve-month period referred to in subparagraph (A) shall be deemed to begin not later than October 1983.

## TITLE XIII—RECONVERSION UNEMPLOYMENT BENEFITS FOR SEAMEN

SEC. 1301. This title shall be administered by the Federal Security Administrator.

### DEFINITIONS

SEC. 1302. When used in this title—

(a) The term "reconversion period" means the period (1) beginning with the fifth Sunday after the date of the enactment of this title, and (2) ending June 30, 1950.

(b) The term "compensation" means cash benefits payable to individuals with respect to their unemployment (including any portion thereof payable with respect to dependents).

(c) The term "Federal maritime service" means service performed prior to July 1, 1949, which is determined to be employment pursuant to section 209(o).

(d) The term "Federal maritime wages" means remuneration determined pursuant to section 209(o) to be remuneration for service referred to in section 209(o)(1) which was performed prior to July 1, 1949.

### COMPENSATION FOR SEAMEN

SEC. 1303. (a) The Administrator is authorized on behalf of the United States to enter into an agreement with any State, or with the unemployment compensation agency of such State, under which such State agency (1) will make, as agent of the United States, payments of compensation, on the basis provided in subsection (b), to individuals who have performed Federal maritime service, and (2) will otherwise cooperate with the Administrator and with other State unemployment compensation agencies in making payments of compensation authorized by this title.

(b) Any such agreement shall provide that compensation will be paid to such individuals, with respect to unemployment occurring in the reconversion period, in the same amounts, on the same terms, and subject to the same conditions as the compensation which would be payable to such individuals under the State unemployment compensation law if such individuals' Federal maritime service and Federal maritime wages had (subject to regulations of the Administrator concerning the allocation of such service and wages among the several States) been included as



employment and wages under such law; except that the compensation to which an individual is entitled under such an agreement for any week shall be reduced by 15 per centum of the amount of any annuity or retirement pay which such individual is entitled to receive, under any law of the United States relating to the retirement of officers or employees of the United States, for the month in which such week begins, unless a deduction from such compensation on account of such annuity or retirement pay is otherwise provided for by the applicable State law.

(c) If in the case of any State an agreement is not entered into under this section or the unemployment compensation agency of such State fails to make payments in accordance with such an agreement, the Administrator, in accordance with regulations prescribed by him, shall make payments of compensation to individuals who file a claim for compensation which is payable under such agreement, or would be payable if such agreement were entered into, on a basis which will provide that they will be paid compensation in the same amounts, on substantially the same terms, and subject to substantially the same conditions as though such agreement had been entered into and such agency made such payments. Final determinations by the Administrator of entitlement to such payments shall be subject to review by the courts in the same manner and to the same extent as is provided in Title II with respect to decisions by the Administrator under such title.

(d) Operators of vessels who are or were general agents of the War Shipping Administration of the United States Maritime Commission shall furnish to individuals who have been in Federal maritime service, to the appropriate State agency, and to the Administrator such information with respect to wages and salaries as the Administrator may determine to be practicable and necessary to carry out the purposes of this title.

(e) Pursuant to regulations prescribed by the Administrator, he, and any State agency making payments of compensation pursuant to an agreement under this section, may—

(1) to the extent that the Administrator finds that it is not feasible for Federal agencies or operators of vessels to furnish information necessary to permit exact and reasonably prompt determinations of the wages or salaries of individuals who have performed Federal maritime service, determine the amount of and pay compensation to any individual under this section, or an agreement thereunder, as if the wages or salary paid such individual for each week of such service were in an amount equal to his average weekly wages or salary for the last pay period of such service occurring prior to the time he files his initial claim for compensation; and

(2) to the extent that information is inadequate to assure the prompt payment of compensation authorized by this section (either on the basis of the exact wages or salaries of the individuals concerned or on the basis prescribed in clause (1) of this subsection), accept certification under oath by individuals of facts relating to their Federal maritime service and to wages and salaries paid them with respect to such service.

#### ADMINISTRATION

SEC. 1304. (a) Determinations of entitlement to payments of compensation by a State unemployment compensation agency under an agreement under this title shall be subject to review in the same manner and to the same extent as determinations under the State unemployment compensation law, and only in such manner and to such extent.

(b) For the purpose of payments made to a State under Title III administration by the unemployment compensation agency of such State pursuant to an agreement under this title shall be deemed to be a part of the administration of the State unemployment compensation law.

(c) The State unemployment compensation agency of each State shall furnish to the Administrator such information as the Administrator may find necessary in carrying out the provisions of this title, and such information shall be deemed reports required by the Administrator for the purposes of section 303(a)(6).

#### PAYMENTS TO STATES

SEC. 1305. (a) Each State shall be entitled to be paid by the United States an amount equal to the additional cost to the State of payments of compensation made under and in accordance with an agreement under this title, which would not have been incurred by the State but for the agreement.

(b) In making payments pursuant to subsection (a) of this section, there shall be paid to the State, either in advance or by way of reimbursement, as may be determined by



the Administrator, such sum as the Administrator estimates the State will be entitled to receive under this title for each calendar quarter; reduced or increased, as the case may be, by any sum by which the Administrator finds that his estimates for any prior calendar quarter were greater or less than the amounts which should have been paid to the State. The amount of such payments may be determined by such statistical, sampling, or other method as may be agreed upon by the Administrator and the State agency.

(c) The Administrator shall from time to time certify to the Secretary of the Treasury for payment to each State the sums payable to such State under this section. The Secretary of the Treasury, prior to audit or settlement by the General Accounting Office, shall make payment, at the time or times fixed by the Administrator, in accordance with certification, from the funds for carrying out the purposes of this title. Notwithstanding any other provision of this title, no compensation shall be paid to any individual pursuant to this title with respect to unemployment occurring<sup>3</sup> prior to the date when funds are made available for such payments.

(d) All money paid to a State under this section shall be used solely for the purposes for which it is paid; and any money so paid which is not used for such purposes shall be returned to the Treasury upon termination of the agreement or termination of the reconversion period, whichever first occurs.

(e) An agreement under this title may require any officer or employee of the State certifying payments or disbursing funds pursuant to the agreement, or otherwise participating in its performance, to give a surety bond to the United States in such amount as the Administrator may deem necessary, and may provide for the payment of the cost of such bond from appropriations for carrying out the purposes of this title.

(f) No person designated by the Administrator, or designated pursuant to an agreement under this title, as a certifying officer shall, in the absence of gross negligence or intent to defraud the United States, be liable with respect to the payment of any compensation certified by him under this title.

(g) No disbursing officer shall, in the absence of gross negligence or intent to defraud the United States, be liable with respect to any payment by him under this title if it was based upon a voucher signed by a certifying officer designated as provided in subsection (f).

#### PENALTIES

SEC. 1306. (a) Whoever, for the purpose of causing any compensation to be paid under this title or under an agreement thereunder where none is authorized to be so paid, shall make or cause to be made any false statement or representation as to any wages paid or received, or whoever makes or causes to be made any false statement of a material fact in any claim for any compensation authorized to be paid under this title or under an agreement thereunder, or whoever makes or causes to be made any false statement, representation, affidavit, or document in connection with such claim, shall, upon conviction thereof, be fined not more than \$1,000 or imprisoned for not more than one year, or both.

(b) Whoever shall obtain or receive any money, check or compensation under this title or an agreement thereunder, without being entitled thereto and with intent to defraud the United States, shall, upon conviction thereof, be fined not more than \$1,000 or imprisoned for not more than one year, or both.

(c) Whoever willfully fails or refuses to furnish information which the Administrator requires him to furnish pursuant to authority of section 1303(d), or willfully furnishes false information pursuant to a requirement of the Administrator under such subsection, shall, upon conviction thereof, be fined not more than \$1,000 or imprisoned for not more than six months, or both.

#### SEC. 1612.

(b)

(2)

(B) monthly (or other periodic) payments received by any individual, under a program established prior to July 1, 1973, if such payments are made by the State of which the individual receiving such payments is a resident, and if eligibility of any individual for such payments is not based on need and is based solely on attainment of age 65 and duration of residence in such State by such individual;<sup>4</sup>

(13) any support or maintenance assistance furnished to or on behalf of such individual (and spouse if any) which (as determined under regulations of the Secretary by such State agency as the chief executive officer of the State may designate) is based on need for such support or maintenance, including assistance

<sup>3</sup>As in original. Should be "occurring".

<sup>4</sup>P.L. 98-369, §2663(g)(3), realigned subparagraph (B) by indenting it 2 ems.

received to assist in meeting the costs of home energy (including both heating and cooling), and which is (i) assistance furnished in kind by a private nonprofit agency, or (ii) assistance furnished by a supplier of home heating oil or gas, by an entity providing home energy whose revenues are primarily derived on a rate-of-return basis regulated by a State or Federal governmental entity, or by a municipal utility providing home energy.<sup>5</sup>

## [SEC. 1613. (c)]

## DISPOSAL OF RESOURCES FOR LESS THAN FAIR MARKET VALUE

## SEC. 1814. (a)

(2)

(B) in the case of inpatient tuberculosis hospital services, such services are or were required to be given on an inpatient basis, by or under the supervision of a physician, for the treatment of an individual for tuberculosis; and such treatment can or could reasonably be expected to (i) improve the condition for which such treatment is or was necessary or (ii) render the condition noncommunicable;

(5) in the case of inpatient tuberculosis hospital services, the services are those which the records of the hospital indicate were furnished to the individual during periods when he was receiving treatment which could reasonably be expected to (A) improve his condition or (B) render it noncommunicable;

## SEC. 1833. (a)

(1) (D) with respect to diagnostic tests performed in a laboratory for which payment is made under this part to the laboratory, the amounts paid shall be equal to 100 percent of the negotiated rate for such tests (as determined pursuant to subsection (h) of this section); (F) with respect to expenses incurred for physicians' services (furnished by a physician who has an agreement in effect with the Secretary by which the physician agrees to accept an assignment described in section 1842(b)(3)(B)(ii) with respect to payment for all physicians' services which are preadmission diagnostic services furnished by the physician to individuals enrolled under this part) which are preadmission diagnostic services for which payment may be made under this part and which are furnished (i) in the outpatient department of a hospital within seven days of such individual's admission to the same hospital as an inpatient or, to the extent practicable as determined by regulations prescribed by the Secretary, to another hospital, or (ii) to the extent practicable as determined by regulations prescribed by the Secretary, in a physician's office within seven days of such individual's admission to a hospital as an inpatient, the amounts paid shall be equal to the reasonable charges for such services, and

(5) in the case of preadmission diagnostic services described in section 1861(s)(2)(C) which are furnished to an individual by the outpatient department of a hospital within 7 days of such individual's admission to the same hospital as an inpatient or (to the extent practicable as determined by regulations prescribed by the Secretary) to another hospital, the reasonable costs for such services.

(h) With respect to diagnostic tests performed in a laboratory for which payment is made under this part to the laboratory, the Secretary is authorized to establish a payment rate which is acceptable to the laboratory and which would be considered the full charge for such tests. Such negotiated rate shall be limited to an amount not in excess of the total payment that would have been made for the services in the absence of such a rate.

## SEC. 1842.

(h) If a physician's bill or request for payment for a physician's services includes a charge to a patient for a laboratory test for which payment may be made under this part, the amount payable with respect to the test shall be determined as follows:

(1) If the bill or request for payment indicates that the physician who submitted the bill or for whose services the request for payment was made personally performed or supervised the performance of the test or that another physician with whom the physician shares his practice personally performed or supervised the test, the payment shall be the reasonable charge for the test (less the applicable deductible and coinsurance amounts).

<sup>5</sup>P.L. 98-369, §2639(c)(2), repealed §404 of P.L. 98-21, which struck out "assistance received to assist in meeting the costs of home energy, including both heating and cooling, which (as determined under regulations of the Secretary by such State agency as the chief executive officer of the State may designate) (B)" and substituted "support or maintenance assistance furnished to or on behalf of such individual (and spouse if any) which (as determined under regulations of the Secretary by such State agency as the chief executive officer of the State may designate) is based on need for such support or maintenance, including assistance received to assist in meeting the costs of home energy (including both heating and cooling), and which".

P.L. 98-369, §2639(c)(1), repealed §545 of P.L. 97-424, which added paragraph (13).



(2) If the bill or request for payment indicates that the test was performed by a laboratory, identifies the laboratory, and indicates the amount the laboratory charged the physician who submitted the bill or for whose services the request for payment was made, payment for the test shall be the lower of—

(A) the laboratory's reasonable charge to individuals enrolled under this part for the test, or

(B) the amount the laboratory charged the physician for the test, plus a nominal fee (where the physician bills for such a service) to cover the physician's costs in collecting and handling the sample on which the test was performed (less the applicable deductible and coinsurance amounts).

(3) If the bill or request for payment (A) does not indicate who performed the test, or (B) indicates that the test was performed by a laboratory but does not identify the laboratory or include the amount charged by the laboratory, payment shall be the lowest charged at which the carrier estimates the test could have been secured by a physician from a laboratory serving the locality (less the applicable deductible and coinsurance amounts).

SEC. 1861.

#### Inpatient Tuberculosis Hospital Services

(d) The term "inpatient tuberculosis hospital services" means inpatient hospital services furnished to an inpatient of a tuberculosis hospital.

(f)

(5) is accredited by the Joint Commission on Accreditation of Hospitals.

#### Tuberculosis Hospital

(g) The term "tuberculosis hospital" means an institution which—

(1) is primarily engaged in providing, by or under the supervision of a physician, medical services for the diagnosis and treatment of tuberculosis;

(2) satisfies the requirements of paragraphs (3) through (9) of subsection (e);

(3) maintains clinical records on all patients and maintains such records as the Secretary finds to be necessary to determine the degree and intensity of the treatment provided to individuals covered by the insurance program established by part A;

(4) meets such staffing requirements as the Secretary finds necessary for the institution to carry out an active program of treatment for individuals who are furnished services in the institution; and

(5) is accredited by the Joint Commission on Accreditation of Hospitals.

In the case of an institution which satisfies paragraphs (1) and (2) of the preceding sentence and which contains a distinct part which also satisfies paragraphs (3) and (4) of such sentence, such distinct part shall be considered to be a "tuberculosis hospital" if the institution is accredited by the Joint Commission on Accreditation of Hospitals or if such distinct part meets requirements equivalent to such accreditation requirements as determined by the Secretary.

(v)(1)

(E)(i) Such regulations shall provide that any determination of reasonable cost with respect to services provided by hospital-based skilled nursing facilities shall be made on the basis of a single standard based on the reasonableness of costs incurred by free standing skilled nursing facilities, subject to such adjustments as the Secretary may deem appropriate.

#### HEALTH INSURANCE BENEFITS ADVISORY COUNCIL

SEC. 1867. (a) There is hereby created a Health Insurance Benefits Advisory Council which shall consist of 19 persons, not otherwise in the employ of the United States, appointed by the Secretary without regard to the provisions of title 5, United States Code, governing appointments in the competitive services. The Secretary shall from time to time appoint one of the members to serve as Chairman. The members shall include persons who are outstanding in fields related to hospital, medical, and other health activities, persons who are representative of organizations and associations of professional personnel in the field of medicine, and at least one person who is representative of the general public. Each member shall hold office for a term of four years, except that any member appointed to fill a vacancy occurring prior to the expiration of the term for which his predecessor was appointed shall be appointed for the remainder of such term. A member shall not be eligible to serve continuously for more than two terms. Members of the Advisory Council, while attending meetings or conferences thereof or otherwise serving on business of the Advisory Council, shall be



entitled to receive compensation at rates fixed by the Secretary, but not exceeding \$100 per day, including traveltime, and while so serving away from their homes or regular places of business they may be allowed travel expenses, including per diem in lieu of subsistence, as authorized by section 5703 of title 5, United States Code, for persons in the Government service employed intermittently. The Advisory Council shall meet as the Secretary deems necessary, but not less than annually.

(b) It shall be the function of the Advisory Council to provide advice and recommendations for the consideration of the Secretary on matters of general policy with respect to this title and title XIX.

SEC. 1886.

(e)

(6)

(C)

(i) employ and fix the compensation of such personnel (not to exceed 25) as may be necessary to carry out its duties;

SEC. 1902. (a)

(10)

(A)

(i) all individuals receiving aid or assistance under any plan of the State approved under title I, X, XIV, or XVI, or part A or part E of title IV (including pregnant women deemed by the State to be receiving such aid as authorized in section 406(g) and individuals considered by the State to be receiving such aid as authorized under section 414(g)), or with respect to whom supplemental security income benefits are being paid under title XVI; and

(26) effective July 1, 1969, provide (A) for a regular program of medical review (including medical evaluation) of each patient's need for skilled nursing facility care or (in the case of individuals who are eligible therefor under the State plan) need for care in a mental hospital, a written plan of care, and, where applicable, a plan of rehabilitation prior to admission to a skilled nursing facility; (B) for periodic inspections to be made in all skilled nursing facilities and mental institutions (if the State plan includes care in such institutions) within the State by one or more medical review teams (composed of physicians and other appropriate health and social service personnel, or, in the case of skilled nursing facilities, composed of physicians or registered nurses and other appropriate health and social service personnel) of (i) the care being provided in such nursing facilities (and mental institutions, if care therein is provided under the State plan) to persons receiving assistance under the State plan, (ii) with respect to each of the patients receiving such care, the adequacy of the services available in particular nursing facilities (or institutions) to meet the current health needs and promote the maximum physical well-being of patients receiving care in such homes<sup>a</sup> (or institutions), (iii) the necessity and desirability of the continued placement of such patients in such nursing facilities (or institutions), and (iv) the feasibility of meeting their health care needs through alternative institutional or noninstitutional services; and (C) for the making by such team or teams of full and complete reports of the findings resulting from such inspections together with any recommendations to the State agency administering or supervising the administration of the State plan;

(31) provide (A) for a regular program of independent professional review (including medical evaluation of each patient's need for intermediate care) and a written plan of service prior to admission or authorization of benefits in an intermediate care facility as determined under regulations of the Secretary; (B) for periodic on-site inspections to be made in all such intermediate care facilities (if the State plan includes care in such institutions) within the State by one or more independent professional review teams (composed of physicians or registered nurses and other appropriate health and social service personnel) of (i) the care being provided in such intermediate care facilities to persons receiving assistance under the State plan, (ii) with respect to each of the patients receiving such care, the adequacy of the services available in particular intermediate care facilities to meet the current health needs and promote the maximum physical well-being of patients receiving care in such facilities, (iii) the necessity and desirability of the continued placement of such patients in such facilities, and (iv) the feasibility of meeting their health care needs through alternative institutional or non-institutional services; and (C) for the making by such team or teams of full and

<sup>a</sup>P.L. 98-369, §2373(b)(6), struck out "homes" and substituted "facilities", effective July 18, 1984.

P.L. 98-617, §3(a)(7), struck out §2373(b)(6) of P.L. 98-369, effective as if it had been omitted from P.L. 98-369.

complete reports of the findings resulting from such inspections, together with any recommendations to the State agency administering or supervising the administration of the State plan;

(43) if the State plan makes provision for payment to a physician for laboratory services the performance of which such physician (or any other physician with whom he shares his practice) did not personally perform or supervise, include provision to insure that payment under the State plan for such laboratory services not exceed the payment authorized for such services by section 1842(h); and

# SEC. 1903.

(g)(1)

(A) in each case for which payment is made under the State plan, a physician certifies at the time of admission, or, if later, the time the individual applies for medical assistance under the State plan (and the physician, or a physician assistant or nurse practitioner under the supervision of a physician, recertifies, where such services are furnished over a period of time, in such cases, at least every 60 days (or, in the case of services that are intermediate care facility services provided in an institution for the mentally retarded, every year), and accompanied by such supporting material, appropriate to the case involved, as may be provided in regulations of the Secretary), that such services are or were required to be given on an inpatient basis because the individual needs or needed such services; and

(B) in each such case, such services were furnished under a plan established and periodically reviewed and evaluated by a physician;

(C) such State has in effect a continuous program of review of utilization pursuant to section 1902(a)(30) whereby each admission is reviewed or screened in accordance with criteria established by medical and other professional personnel who are not themselves directly responsible for the care of the patient involved, and who do not have a significant financial interest in any such institution and are not, except in the case of a hospital, employed by the institution providing the care involved; and the information developed from such review or screening, along with the data obtained from prior reviews of the necessity for admission and continued stay of patients by such professional personnel, shall be used as the basis for establishing the size and composition of the sample of admissions to be subject to review and evaluation by such personnel, and any such sample may be of any size up to 100 per centum of all admissions and must be of sufficient size to serve the purpose of (i) identifying the patterns of care being provided and the changes occurring over time in such patterns so that the need for modification may be ascertained, and (ii) subjecting admissions to early or more extensive review where information indicates that such consideration is warranted; and

(D) such State has an effective program of medical review of the care of patients in mental hospitals, skilled nursing facilities, and intermediate care facilities pursuant to section 1902(a)(26) and (31) whereby the professional management of each case is reviewed and evaluated at least annually by independent professional review teams.

(6) The Secretary shall submit to Congress, not later than sixty days after the end of such calendar quarter, a report on—

(A) his determination as to whether or not each showing, made under paragraph (1) by a State with respect to the calendar quarter, has been found to be satisfactory under such paragraph;

(B) his review (through onsite surveys and otherwise) under paragraph (2) of the validity of showings previously submitted by a State; and

(C) any reduction in the Federal medical assistance percentage he has imposed on a State because of its submittal under paragraph (1) of an unsatisfactory or invalid showing.

# SEC. 1905.

(a)

(9) clinic services;

(h)(1)

(A) inpatient services which are provided in an institution which is accredited as a psychiatric hospital by the Joint Commission on Accreditation of Hospitals;



**Provisions of the Social Security Act as in Effect Prior to  
P.L. 98-378, Approved August 16, 1984 (98 Stat. 1305)  
Child Support Enforcement Amendments of 1984**

**SEC. 403.**

(h) Notwithstanding any other provision of this Act, the amount payable to any State under this part for quarters in a fiscal year shall with respect to quarters beginning after December 31, 1976, be reduced by 5 per centum of such amount if such State is found by the Secretary as the result of the annual audit to have failed to have an effective program meeting the requirements of section 402(a)(27) in any fiscal year beginning after September 30, 1976 (but, in the case of the fiscal year beginning October 1, 1976, only considering the second, third, and fourth quarters thereof).

**SEC. 452. (a)**

(10)

(C) the number of child support cases (with separate identification of the number in which collection of spousal support was involved) in each State during each quarter of the fiscal year last ending before the report is submitted and during each quarter of the preceding fiscal year (including the transitional period beginning July 1, 1976, and ending September 30, 1976, in the case of the first report to which this subparagraph applies), and the disposition of such cases;

**SEC. 454.**

(6) (B) an application fee for furnishing such services may be imposed, except that the amount of any such application fee shall be reasonable, as determined under regulations of the Secretary, and

**SEC. 455. (a)(1)**

(A)<sup>1</sup> equal to 70 percent of the total amounts expended by such State during such quarter for the operation of the plan approved under section 454,

(2) equal to 50 percent of the total amounts expended by such State during such quarter for the operation of a plan which meets the conditions of section 454 except as is provided by a waiver by the Secretary which is granted pursuant to specific authority set forth in the law, and

**INCENTIVE PAYMENT TO STATES AND LOCALITIES**

**SEC. 458. (a)** When a political subdivision of a State makes, for the State of which it is a political subdivision, or one State makes, for another State, or a State on its own behalf makes, the enforcement and collection of the support rights assigned under section 402(a)(26) (either within or outside of such State), there shall be paid to such political subdivision, such other State, or such State (in the case of a State which on its own behalf makes such enforcement and collection) from amounts which would otherwise represent the Federal share of assistance to the family of the absent parent an amount equal to 12 percent of any amount collected and required to be distributed as provided in paragraphs (1), (2), and (4)(A) of section 457(b)<sup>2</sup>.

(b) Where more than one jurisdiction is involved in such enforcement or collection, the amount of the incentive payment determined under subsection (a) shall be allocated among the jurisdictions in a manner to be prescribed by the Secretary.

(c) No payment under the preceding provisions of this section shall be made to any State or political subdivision thereof with respect to any amount collected and distributed by it unless such amount was collected and distributed in accordance with the State plan of the State approved by the Secretary as meeting the conditions required by section 454.

**Provisions of the Social Security Act as in Effect Prior to  
P.L. 98-460, Approved October 9, 1984 (98 Stat. 1794)  
Social Security Disability Benefits Reform Act of 1984**

**SEC. 221.**

(b)(1) If the Secretary finds, after notice and opportunity for a hearing, that a State agency is substantially failing to make disability determinations in a manner consistent with his regulations and other written guidelines, the Secretary shall, not

<sup>1</sup>P.L. 98-378, §4(a)(3), redesignated paragraph (1) as subparagraph (A), applicable with respect to fiscal years after fiscal year 1983.

<sup>2</sup>P.L. 98-378, §5(c)(2)(A), struck out "section 457 to reduce or repay assistance payments" and substituted "paragraphs (1), (2), and (4)(A) of section 457(b)", effective until September 30, 1985.



# SUPERSEDED PROVISIONS—SOCIAL SECURITY ACT

337 03/86

49 FR 43775 381

earlier than 180 days following his finding, and after he has complied with the requirements of paragraph (3), make the disability determinations referred to in subsection (a)(1).

Sec. 223.

## Suspension of Benefits for Inmates of Penal Institutions

(f)(1) Notwithstanding any other provision of this title, no monthly benefits shall be paid under this section, or under section 202(d) by reason of being under a disability, to any individual for any month during which such individual is confined in a jail, prison, or other penal institution or correctional facility, pursuant to his conviction of an offense which constituted a felony under applicable law, unless such individual is actively and satisfactorily participating in a rehabilitation program which has been specifically approved for such individual by a court of law and, as determined by the Secretary, is expected to result in such individual being able to engage in substantial gainful activity upon release and within a reasonable time.

(2) Benefits which would be payable to any individual (other than a confined individual to whom benefits are not payable by reason of paragraph (1)) under this title on the basis of the wages and self-employment income of such a confined individual but for the provisions of paragraph (1), shall be payable as though such confined individual were receiving such benefits under this section.

(3) Notwithstanding the provisions of section 552a of title 5, United States Code, or any other provision of Federal or State law, any agency of the United States Government or of any State (or political subdivision thereof) shall make available to the Secretary, upon written request, the name and social security account number of any individual who is confined in a jail, prison, or other penal institution or correctional facility under the jurisdiction of such agency, pursuant to his conviction of an offense which constituted a felony under applicable law, which the Secretary may require to carry out the provisions of this subsection.

## Provision Deemed to be in Social Security Act as in Effect Prior to October 31, 1984 (49 Federal Register 43775) [Cost-of-Living Increase]

Sec. 215.

(a)

TABLE 1.—TABLE FOR DETERMINING PRIMARY INSURANCE AMOUNT AND MAXIMUM FAMILY BENEFITS BEGINNING DECEMBER 1983<sup>1</sup>

I (Primary insurance benefit under 1939 Act, as modified)		II (Primary insurance amount effective for June 1982)	III (Average monthly wage)		IV (Primary insurance amount)	V (Maximum family benefits)
If an individual's primary insurance benefit (as determined under subsec. (d)) is—		Or his primary insurance amount (as determined under subsec. (c)) is—	Or his average monthly wage (as determined under subsec. (b)) is—		The amount referred to in the preceding paragraphs of this subsection shall be—	And the maximum amount of benefits payable (as provided in sec. 203(a)) on the basis of his wages and self-employment income shall be—
At least—	But not more than—		At least—	But not more than—		
	\$16.20	\$182.90		\$76	\$189.30	\$284.00
\$16.21	16.84	185.80	\$77	78	192.30	288.40
16.85	17.60	190.20	79	80	196.80	295.20
17.61	18.40	193.50	81	81	200.20	300.60
18.41	19.24	196.90	82	83	203.70	305.80

## SUPERSEDED PROVISIONS—SOCIAL SECURITY ACT

382 49 FR 43775

337 03/86

I (Primary insurance benefit under 1939 Act, as modified)		II (Primary insurance amount ef- fective for June 1982)	III (Average monthly wage)		IV (Primary insurance amount)	V (Maximum family ben- efits)
If an individual's primary insurance benefit (as deter- mined under subsec. (d)) is—		Or his primary insur- ance amount (as determined under subsec. (c)) is—	Or his average monthly wage (as de- termined under sub- sec. (b)) is—		The amount referred to in the pre- ceding para- graphs of this sub- section shall be—	And the maximum amount of benefits payable (as provided in sec. 203(a)) on the basis of his wages and self- employ- ment in- come shall be—
At least—	But not more than—		At least—	But not more than—		
19.25	20.00	201.10	84	85	208.10	312.40
20.01	20.64	205.00	86	87	212.10	318.20
20.65	21.28	208.10	88	89	215.30	323.10
21.29	21.88	212.30	90	90	219.70	329.60
21.89	22.28	215.90	91	92	223.40	335.30
22.29	22.68	219.40	93	94	227.00	340.60
22.69	23.08	223.00	95	96	230.80	346.30
23.09	23.44	227.00	97	97	234.90	*352.50
23.45	23.76	230.80	98	99	238.80	358.30
23.77	24.20	235.30	100	101	243.50	365.30
24.21	24.60	238.50	102	102	246.80	370.40
24.61	25.00	242.50	103	104	250.90	376.40
25.01	25.48	247.00	105	106	255.60	383.50
25.49	25.92	251.10	107	107	259.80	389.80
25.93	26.40	254.90	108	109	263.80	395.70
26.41	26.94	258.90	110	113	267.90	401.90
26.95	27.46	262.50	114	118	271.60	407.60
27.47	28.00	266.50	119	122	275.80	413.70
28.01	28.68	270.70	123	127	280.10	420.30
28.69	29.25	274.70	128	132	284.30	426.40
29.26	29.68	278.40	133	136	288.10	432.30
29.69	30.36	282.20	137	141	292.00	438.20
30.37	30.92	286.30	142	146	296.30	444.40
30.93	31.36	290.60	147	150	300.70	451.10
31.37	32.00	293.90	151	155	304.10	456.30
32.01	32.60	298.20	156	160	308.60	463.00
*32.61	33.20	302.20	161	164	312.70	469.10
33.21	33.88	305.90	165	169	316.60	475.00
33.89	34.50	310.10	170	174	320.90	481.50
34.51	35.00	313.90	175	178	324.80	487.30
35.01	35.80	318.10	179	183	329.20	493.80
35.81	36.40	321.80	184	188	333.00	499.60
36.41	37.08	326.00	189	193	337.40	506.30
37.09	37.60	330.00	194	197	341.50	512.40
37.61	38.20	333.90	198	202	345.50	518.40
38.21	39.12	338.30	203	207	350.10	525.10
39.13	39.68	342.10	208	211	354.00	531.20
39.69	40.33	345.20	212	216	357.20	536.00
40.34	41.12	349.60	217	221	361.80	542.80
41.13	41.76	353.60	222	225	365.90	549.00
41.77	42.44	357.90	226	230	370.40	555.70
42.45	43.20	361.80	231	235	374.40	561.90
43.21	43.76	366.20	236	239	379.00	568.60
43.77	44.44	369.60	240	244	382.50	576.30
44.45	44.88	373.20	245	249	386.20	588.30
44.89	45.60	377.90	250	253	391.10	597.90
		381.50	254	258	394.80	609.50
		384.90	259	263	398.30	621.10

## SUPERSEDED PROVISIONS—SOCIAL SECURITY ACT

337

03/86

49 FR 43775

383

I (Primary insurance benefit under 1939 Act, as modified)		II (Primary insurance amount ef- fective for June 1982)	III (Average monthly wage)		IV (Primary insurance amount)	V (Maximum family ben- efits)
If an individual's primary insurance benefit (as deter- mined under subsec. (d)) is—		Or his pri- mary insur- ance amount (as determined under sub- sec. (c)) is—	Or his average monthly wage (as de- termined under sub- sec. (b)) is—		The amount referred to in the pre- ceding para- graphs of this sub- section shall be—	And the maximum amount of benefits payable (as provided in sec. 203(a)) on the basis of his wages and self- employ- ment in- come shall be—
At least—	But not more than—		At least—	But not more than—		
		389.70	264	267	403.30	630.50
		393.20	268	272	406.90	642.50
		397.50	273	277	411.40	654.00
		401.30	278	281	415.30	663.40
		405.30	282	286	419.40	675.30
		409.60	287	291	423.90	687.30
		412.90	292	295	427.30	696.50
		417.40	296	300	432.00	708.20
		421.30	301	305	436.00	720.30
		424.90	306	309	439.70	729.60
		429.20	310	314	444.20	741.30
		432.70	315	319	447.80	753.30
		436.70	320	323	451.90	762.60
		440.80	324	328	456.20	774.30
		444.50	329	333	460.00	786.10
		449.20	334	337	464.90	795.90
		452.30	338	342	468.10	807.40
		456.60	343	347	472.50	819.30
		460.90	348	351	477.00	828.60
		464.30	352	356	480.50	840.40
		468.90	357	361	485.30	852.30
		472.50	362	365	489.00	861.70
		476.20	366	370	492.80	873.50
		480.50	371	375	497.30	885.00
		484.50	376	379	501.40	894.80
		488.60	380	384	505.70	906.70
		492.20	385	389	509.40	918.30
		496.00	390	393	513.30	927.60
		500.40	394	398	517.90	939.70
		504.20	399	403	521.80	951.40
		508.50	404	407	526.20	960.60
		511.90	408	412	529.80	972.60
		515.50	413	417	533.50	984.20
		519.10	418	421	537.20	993.70
		523.30	422	426	541.60	1005.60
		526.90	427	431	545.30	1017.30
		530.10	432	436	548.60	1029.20
		534.50	437	440	553.20	1033.80
		537.80	441	445	556.60	1040.00
		541.50	446	450	560.40	1045.70
		545.40	451	454	564.40	1050.20
		549.10	455	459	568.30	1056.10
		552.60	460	464	571.90	1061.80
		556.10	465	468	575.50	1066.90
		560.50	469	473	580.10	1072.60
		563.60	474	478	583.30	1078.60
		567.20	479	482	587.00	1083.40
		571.20	483	487	591.10	1089.50



I (Primary insurance benefit under 1939 Act, as modified)		II (Primary insurance amount ef- fective for June 1982)	III (Average monthly wage)		IV (Primary insurance amount)	V (Maximum family ben- efits)
If an individual's primary insurance benefit (as deter- mined under subsec. (d)) is—		Or his pri- mary insur- ance amount (as determined under sub- sec. (c)) is—	Or his average monthly wage (as de- termined under sub- sec. (b)) is—		The amount referred to in the pre- ceding para- graphs of this sub- section shall be—	And the maximum amount of benefits payable (as provided in sec. 203(a)) on the basis of his wages and self- employ- ment in- come shall be—
At least—	But not more than—		At least—	But not more than—		
		575.00	488	492	595.10	1095.40
		578.40	493	496	598.60	1100.10
		582.60	497	501	602.90	1105.70
		585.90	502	506	606.40	1111.50
		589.50	507	510	610.10	1116.40
		593.20	511	515	613.90	1122.30
		597.30	516	520	618.20	1128.50
		600.70	521	524	621.70	1132.90
		604.20	525	529	625.30	1138.90
		*608.06	530	534	629.90	1144.70
		611.70	535	538	633.10	1149.40
		615.60	539	*543	637.10	1155.40
		619.30	544	548	640.90	1161.30
		623.20	549	553	645.00	1167.20
		626.60	554	556	648.50	1170.60
		629.60	557	560	651.60	1175.40
		633.10	561	563	655.20	1179.00
		636.30	564	567	658.50	1183.80
		640.10	568	570	662.50	1187.10
		643.10	571	574	665.60	1191.80
		646.30	575	577	668.90	1195.70
		649.30	578	581	672.00	1200.00
		652.70	582	584	675.50	1203.80
		655.50	585	588	678.40	1208.50
		659.50	589	591	682.50	1211.90
		662.70	592	595	685.80	1216.70
		665.90	596	598	689.20	1219.90
		669.20	599	602	692.60	1225.10
		672.40	603	605	695.90	1228.50
		675.60	606	609	699.20	1232.90
		679.10	610	612	702.80	1236.80
		682.30	613	616	706.10	1241.40
		685.50	617	620	709.40	1246.20
		688.90	621	623	713.00	1249.60
		691.90	624	627	716.10	1254.50
		695.40	628	630	719.70	1258.90
		698.60	631	634	723.00	1265.10
		702.00	635	637	726.50	1271.00
		705.40	638	641	730.00	1277.10
		708.50	642	644	733.20	1282.80
		711.80	645	648	736.70	1288.90
		714.90	649	652	739.90	1294.60
		717.10	653	656	742.10	1298.40
		719.10	657	660	744.20	1301.90
		721.60	661	665	746.80	1306.80
		724.10	666	670	749.40	1311.50
		726.80	671	675	752.20	1315.80
		729.50	676	680	755.00	1320.60

## SUPERSEDED PROVISIONS—SOCIAL SECURITY ACT

337 03/86

49 FR 43775

385

I (Primary insurance benefit under 1939 Act, as modified)		II (Primary insurance amount ef- fective for June 1982)	III (Average monthly wage)		IV (Primary insurance amount)	V (Maximum family ben- efits)
If an individual's primary insurance benefit (as deter- mined under subsec. (d)) is—		Or his pri- mary insur- ance amount (as determined under sub- sec. (c)) is—	Or his average monthly wage (as de- termined under sub- sec. (b)) is—		The amount referred to in the pre- ceding para- graphs of this sub- section shall be—	And the maximum amount of benefits payable (as provided in sec. 203(a)) on the basis of his wages and self- employ- ment in- come shall be—
At least—	But not more than—		At least—	But not more than—		
		731.90	681	685	757.50	1325.30
		734.80	686	690	760.50	1329.70
		737.10	691	695	762.80	1334.90
		739.50	696	700	765.30	1339.30
		742.30	701	705	768.20	1344.00
		744.90	706	710	770.90	1348.80
		747.70	711	715	773.80	1353.20
		750.10	716	720	776.30	1358.10
		752.70	721	725	779.00	1362.70
		755.40	726	730	781.80	1367.60
		757.90	731	735	784.40	1372.30
		760.60	736	740	787.20	1376.80
		763.00	741	745	789.70	1381.80
		765.30	746	750	792.00	1386.00
		767.90	751	755	794.70	1390.40
		770.00	756	760	797.00	1394.10
		772.30	761	765	799.30	1398.10
		774.10	766	770	801.10	1402.20
		776.50	771	775	803.60	1405.80
		778.60	776	780	805.80	1409.70
		780.90	781	785	808.20	1413.70
		782.80	786	790	810.10	1417.50
		784.90	791	795	812.30	1421.40
		787.20	796	800	814.70	1425.40
		789.40	801	805	817.00	1429.40
		791.60	806	810	819.30	1433.20
		793.70	811	815	821.40	1437.30
		795.90	816	820	823.70	1441.00
		798.00	821	825	825.90	1445.10
		800.20	826	830	828.20	1448.80
		802.30	831	835	830.30	1453.00
		804.40	836	840	832.50	1456.60
		806.60	841	845	834.80	1460.90
		808.60	846	850	836.90	1464.30
		811.00	851	855	839.30	1468.50
		813.10	856	860	841.50	1472.30
		815.20	861	865	843.70	1476.30
		817.50	866	870	846.10	1480.20
		819.60	871	875	848.20	1484.10
		821.70	876	880	850.40	1487.90
		823.90	881	885	852.70	1492.00
		825.90	886	890	854.80	1495.60
		828.10	891	895	857.00	1500.10
		830.30	896	900	859.30	1503.50
		832.60	901	905	861.70	1507.60
		834.70	906	910	863.90	1511.60
		836.90	911	915	866.10	1515.50
		839.30	916	920	868.60	1519.10

## SUPERSEDED PROVISIONS—SOCIAL SECURITY ACT

386 49 FR 43775

337 03/86

I (Primary insurance benefit under 1939 Act, as modified)		II (Primary insurance amount effective for June 1982)	III (Average monthly wage)		IV (Primary insurance amount)	V (Maximum family benefits)
If an individual's primary insurance benefit (as determined under subsec. (d)) is—		Or his primary insurance amount (as determined under subsec. (c)) is—	Or his average monthly wage (as determined under subsec. (b)) is—		The amount referred to in the preceding paragraphs of this subsection shall be—	And the maximum amount of benefits payable (as provided in sec. 203(a)) on the basis of his wages and self-employment income shall be—
At least—	But not more than—		At least—	But not more than—		
		841.10	921	925	870.50	1523.40
		843.10	926	930	872.60	1527.00
		845.30	931	935	874.80	1531.00
		847.60	936	940	877.20	1534.90
		849.70	941	945	879.40	1538.90
		851.80	946	950	881.60	1542.70
		854.20	951	955	884.00	1546.80
		856.60	956	960	886.50	1550.70
		858.70	961	965	888.70	1554.30
		860.30	966	970	890.40	1558.50
		862.60	971	975	892.70	1562.50
		864.70	976	980	894.90	1566.10
		867.20	981	985	897.50	1570.00
		869.10	986	990	899.50	1574.00
		871.30	991	995	901.70	1578.00
		873.60	996	1000	904.10	1581.70
		875.60	1001	1005	906.20	1585.10
		877.10	1006	1010	907.70	1588.80
		879.30	1011	1015	910.00	1592.10
		881.40	1016	1020	912.20	1596.00
		883.20	1021	1025	914.10	1599.20
		884.80	1026	1030	915.70	1602.90
		887.10	1031	1035	918.10	1606.40
		888.90	1036	1040	920.00	1609.80
		890.90	1041	1045	922.00	1613.60
		893.10	1046	1050	924.30	1616.90
		894.60	1051	1055	925.90	1620.00
		896.60	1056	1060	927.90	1624.10
		898.80	1061	1065	930.20	1627.40
		900.70	1066	1070	932.20	1631.00
		902.60	1071	1075	934.10	1634.60
		904.50	1076	1080	936.10	1638.00
		906.60	1081	1085	938.30	1641.50
		908.30	1086	1090	940.00	1645.00
		910.40	1091	1095	942.20	1648.60
		912.50	1096	1100	944.40	1652.30
		914.10	1101	1105	946.00	1655.50
		916.20	1106	1110	948.20	1659.20
		918.20	1111	1115	950.30	1662.50
		920.00	1116	1120	952.20	1666.30
		922.10	1121	1125	954.30	1669.60
		923.90	1126	1130	956.20	1673.20
		925.80	1131	1135	958.20	1676.50
		927.90	1136	1140	960.30	1680.40
		930.00	1141	1145	962.50	1683.90
		931.90	1146	1150	964.50	1687.30
		933.50	1151	1155	966.10	1690.60
		935.70	1156	1160	968.40	1694.20



## SUPERSEDED PROVISIONS—SOCIAL SECURITY ACT

337 03/86

49 FR 43775

387

I (Primary insurance benefit under 1939 Act, as modified)		II (Primary insurance amount ef- fective for June 1982)	III (Average monthly wage)		IV (Primary insurance amount)	V (Maximum family ben- efits)
If an individual's primary insurance benefit (as deter- mined under subsec. (d)) is—		Or his primary in- surance amount (as determined under sub- sec. (c)) is—	Or his average monthly wage (as de- termined under sub- sec. (b)) is—		The amount referred to in the pre- ceding para- graphs of this sub- section shall be—	And the maximum amount of benefits payable (as provided in sec. 203(a)) on the basis of his wages and self- employ- ment in- come shall be—
At least—	But not more than—		At least—	But not more than—		
		937.70	1161	1165	970.50	1697.90
		939.60	1166	1170	972.40	1701.50
		941.60	1171	1175	974.50	1705.00
		943.40	1176	1180	976.40	1708.50
		945.10	1181	1185	978.10	1711.50
		947.00	1186	1190	980.10	1714.70
		948.60	1191	1195	981.80	1718.20
		950.50	1196	1200	983.70	1721.50
		952.40	1201	1205	985.70	1724.60
		954.20	1206	1210	987.50	1728.10
		955.90	1211	1215	989.30	1731.20
		957.70	1216	1220	991.20	1734.40
		959.60	1221	1225	993.10	1737.50
		961.50	1226	1230	995.10	1741.00
		963.10	1231	1235	996.80	1744.10
		964.80	1236	1240	998.50	1747.50
		966.80	1241	1245	1000.60	1750.90
		968.60	1246	1250	1002.50	1754.10
		970.30	1251	1255	1004.20	1757.20
		972.10	1256	1260	1006.10	1760.60
		974.10	1261	1265	1008.10	1763.90
		975.80	1266	1270	1009.90	1767.10
		977.40	1271	1275	1011.60	1770.10
		979.30	1276	1280	1013.50	1773.60
		980.80	1281	1285	1015.10	1776.50
		982.70	1286	1290	1017.00	1779.60
		984.50	1291	1295	1018.90	1782.60
		986.00	1296	1300	1020.50	1785.70
		987.70	1301	1305	1022.20	1788.70
		989.30	1306	1310	1023.90	1791.80
		991.10	1311	1315	1025.70	1794.80
		993.00	1316	1320	1027.70	1798.10
		994.50	1321	1325	1029.30	1800.90
		996.30	1326	1330	1031.10	1804.30
		997.80	1331	1335	1032.70	1807.30
		999.60	1336	1340	1034.50	1810.40
		1001.30	1341	1345	1036.30	1813.40
		1002.90	1346	1350	1038.00	1816.40
		1004.70	1351	1355	1039.80	1819.40
		1006.30	1356	1360	1041.50	1822.50
		1008.20	1361	1365	1043.40	1825.50
		1009.60	1366	1370	1044.90	1828.60
		1011.40	1371	1375	1046.70	1831.60
		1013.20	1376	1380	1048.60	1834.70
		1014.60	1381	1385	1050.10	1837.50
		1016.30	1386	1390	1051.80	1840.50
		1017.80	1391	1395	1053.40	1843.40
		1019.30	1396	1400	1054.90	1846.30

**SUPERSEDED PROVISIONS—SOCIAL SECURITY ACT**

388 49 FR 43775

337 03/86

I (Primary insurance benefit under 1939 Act, as modified)		II (Primary insurance amount effective for June 1982)	III (Average monthly wage)		IV (Primary insurance amount)	V (Maximum family benefits)
If an individual's primary insurance benefit (as determined under subsec. (d)) is—		Or his primary insurance amount (as determined under subsec. (c)) is—	Or his average monthly wage (as determined under subsec. (b)) is—		The amount referred to in the preceding paragraphs of this subsection shall be—	And the maximum amount of benefits payable (as provided in sec. 203(a)) on the basis of his wages and self-employment income shall be—
At least—	But not more than—		At least—	But not more than—		
		1021.00	1401	1405	1056.70	1849.00
		1022.50	1406	1410	1058.20	1852.00
		1024.10	1411	1415	1059.90	1854.90
		1025.70	1416	1420	1061.50	1857.90
		1027.30	1421	1425	1063.20	1860.80
		1028.80	1426	1430	1064.80	1863.70
		1030.70	1431	1435	1066.70	1866.50
		1032.30	1436	1440	1068.40	1869.40
		1033.80	1441	1445	1069.90	1872.20
		1035.50	1446	1450	1071.70	1875.40
		1037.00	1451	1455	1073.20	1878.10
		1038.50	1456	1460	1074.80	1881.10
		1040.20	1461	1465	1076.60	1883.90
		1041.70	1466	1470	1078.10	1886.80
		1043.30	1471	1475	1079.80	1889.70
		1044.80	1476	1480	1081.30	1892.30
		1046.50	1481	1485	1083.10	1895.20
		1047.90	1486	1490	1084.50	1897.70
		1049.50	1491	1495	1086.20	1900.60
		1050.90	1496	1500	1087.60	1903.30
		1052.40	1501	1505	1089.20	1906.20
		1053.90	1506	1510	1090.70	1908.60
		1055.40	1511	1515	1092.30	1911.40
		1057.00	1516	1520	1093.90	1914.20
		1058.40	1521	1525	1095.40	1917.10
		1059.90	1526	1530	1096.90	1919.50
		1061.40	1531	1535	1098.50	1922.30
		1062.90	1536	1540	1100.10	1925.10
		1064.40	1541	1545	1101.60	1927.80
		1065.90	1546	1550	1103.20	1930.40
		1067.50	1551	1555	1104.80	1933.20
		1068.90	1556	1560	1106.30	1935.90
		1070.40	1561	1565	1107.80	1938.70
		1071.90	1566	1570	1109.40	1941.20
		1073.40	1571	1575	1110.90	1944.10
		1074.80	1576	1580	1112.40	1946.80
		1076.40	1581	1585	1114.00	1949.50
		1077.90	1586	1590	1115.60	1952.10
		1079.40	1591	1595	1117.10	1955.00
		1080.90	1596	1600	1118.70	1957.70
		1082.40	1601	1605	1120.20	1960.40
		1083.90	1606	1610	1121.80	1962.90
		1085.30	1611	1615	1123.20	1965.80
		1086.90	1616	1620	1124.90	1968.50
		1088.40	1621	1625	1126.40	1971.30
		1090.00	1626	1630	1128.10	1973.90
		1091.50	1631	1635	1129.70	1976.80
		1092.90	1636	1640	1131.10	1979.30

## SUPERSEDED PROVISIONS—SOCIAL SECURITY ACT

337 03/86

49 FR 43775

389

I (Primary insurance benefit under 1939 Act, as modified)		II (Primary insurance amount effective for June 1982)	III (Average monthly wage)		IV (Primary insurance amount)	V (Maximum family benefits)
If an individual's primary insurance benefit (as determined under subsec. (d)) is—		Or his primary insurance amount (as determined under subsec. (c)) is—	Or his average monthly wage (as determined under subsec. (b)) is—		The amount referred to in the preceding paragraphs of this subsection shall be—	And the maximum amount of benefits payable (as provided in sec. 203(a)) on the basis of his wages and self-employment income shall be—
At least—	But not more than—		At least—	But not more than—		
		1094.50	1641	1645	1132.80	1982.20
		1096.00	1646	1650	1134.30	1984.80
		1097.50	1651	1655	1135.90	1987.60
		1099.00	1656	1660	1137.40	1990.20
		1100.40	1661	1665	1138.90	1992.90
		1102.00	1666	1670	1140.50	1995.60
		1103.40	1671	1675	1142.00	1998.40
		1105.00	1676	1680	1143.60	2001.10
		1106.50	1681	1685	1145.20	2003.90
		1108.00	1686	1690	1146.70	2006.50
		1109.50	1691	1695	1148.30	2009.30
		1110.80	1696	1700	1149.60	2012.00
		1112.40	1701	1705	1151.30	2014.80
		1113.80	1706	1710	1152.70	2017.40
		1115.30	1711	1715	1154.30	2020.10
		1116.80	1716	1720	1155.80	2022.80
		1118.30	1721	1725	1157.40	2025.70
		1119.90	1726	1730	1159.00	2028.20
		1121.30	1731	1735	1160.50	2031.00
		1122.90	1736	1740	1162.20	2033.60
		1124.30	1741	1745	1163.60	2036.50
		1125.80	1746	1750	1165.20	2039.10
		1127.30	1751	1755	1166.70	2041.90
		1128.80	1756	1760	1168.30	2044.60
		1130.40	1761	1765	1169.90	2047.50
		1131.80	1766	1770	1171.40	2049.90
		1133.30	1771	1775	1172.90	2052.70
		1134.80	1776	1780	1174.50	2055.50
		1136.30	1781	1785	1176.00	2058.40
		1137.90	1786	1790	1177.70	2060.70
		1139.40	1791	1795	1179.20	2063.50
		1140.90	1796	1800	1180.80	2066.30
		1142.40	1801	1805	1182.30	2069.10
		1143.90	1806	1810	1183.90	2071.70
		1145.40	1811	1815	1185.40	2074.50
		1146.90	1816	1820	1187.00	2077.20
		1148.30	1821	1825	1188.40	2080.00
		1149.90	1826	1830	1190.10	2082.50
		1151.40	1831	1835	1191.60	2085.40
		1152.90	1836	1840	1193.20	2088.20
		1154.40	1841	1845	1194.80	2091.00
		1155.80	1846	1850	1196.20	2093.30
		1157.40	1851	1855	1197.90	2096.20
		1158.80	1856	1860	1199.30	2098.90
		1160.40	1861	1865	1201.00	2101.70
		1161.90	1866	1870	1202.50	2104.20
		1163.30	1871	1875	1204.00	2107.10
		1164.90	1876	1880	1205.60	2109.80



## SUPERSEDED PROVISIONS—SOCIAL SECURITY ACT

390 49 FR 43775

337 03/86

I (Primary insurance benefit under 1939 Act, as modified)		II (Primary insurance amount effective for June 1982)	III (Average monthly wage)		IV (Primary insurance amount)	V (Maximum family benefits)
If an individual's primary insurance benefit (as determined under subsec. (d)) is—		Or his primary insurance amount (as determined under subsec. (c)) is—	Or his average monthly wage (as determined under subsec. (b)) is—		The amount referred to in the preceding paragraphs of this subsection shall be—	And the maximum amount of benefits payable (as provided in sec. 203(a)) on the basis of his wages and self-employment income shall be—
At least—	But not more than—		At least—	But not more than—		
		1166.30	1881	1885	1207.10	2112.60
		1167.90	1886	1890	1208.70	2115.20
		1169.30	1891	1895	1210.20	2118.10
		1170.90	1896	1900	1211.80	2120.70
		1172.40	1901	1905	1213.40	2123.50
		1173.80	1906	1910	1214.80	2126.00
		1175.30	1911	1915	1216.40	2128.60
		1176.60	1916	1920	1217.70	2131.20
		1177.90	1921	1925	1219.10	2133.60
		1179.30	1926	1930	1220.50	2136.20
		1180.70	1931	1935	1222.00	2138.50
		1182.10	1936	1940	1223.40	2141.20
		1183.40	1941	1945	1224.80	2143.50
		1184.90	1946	1950	1226.30	2146.00
		1186.20	1951	1955	1227.70	2148.40
		1187.50	1956	1960	1229.00	2151.10
		1188.90	1961	1965	1230.50	2153.40
		1190.30	1966	1970	1231.90	2156.00
		1191.70	1971	1975	1233.40	2158.20
		1192.90	1976	1980	1234.60	2160.80
		1194.50	1981	1985	1236.30	2163.30
		1195.70	1986	1990	1237.50	2165.80
		1197.00	1991	1995	1238.80	2168.20
		1198.40	1996	2000	1240.30	2170.80
		1199.80	2001	2005	1241.70	2173.10
		1201.20	2006	2010	1243.20	2175.70
		1202.50	2011	2015	1244.50	2178.10
		1204.00	2016	2020	1246.10	2180.60
		1205.30	2021	2025	1247.40	2183.10
		1206.60	2026	2030	1248.80	2185.70
		1208.00	2031	2035	1250.20	2187.90
		1209.40	2036	2040	*1251.70	*2190.50
		1210.80	2041	2045	1253.10	*2192.80
		1212.10	2046	2050	1254.50	**2195.50
		1213.60	2051	2055	1256.00	2197.90
		1214.90	2056	2060	1257.40	2200.40
		1216.10	2061	2065	1258.60	2202.70
		1217.50	2066	2070	1260.10	2205.40
		1218.90	2071	2075	1261.50	2207.70
		1220.30	2076	2080	1263.00	2210.30
		1221.60	2081	2085	1264.30	2212.70
		1223.00	2086	2090	1265.80	2215.30
		1224.40	2091	2095	1267.20	2217.60
		1225.70	2096	2100	1268.50	2220.20
		1227.10	2101	2105	1270.00	2222.50
		1228.50	2106	2110	1271.40	2225.20
		1229.90	2111	2115	1272.90	2227.50
		1231.20	2116	2120	1274.20	2230.10

## SUPERSEDED PROVISIONS—SOCIAL SECURITY ACT

337 03/86

49 FR 43775 391

I (Primary insurance benefit under 1939 Act, as modified)		II (Primary insurance amount effective for June 1982)	III (Average monthly wage)		IV (Primary insurance amount)	V (Maximum family benefits)
If an individual's primary insurance benefit (as determined under subsec. (d)) is—		Or his primary insurance amount (as determined under subsec. (c)) is—	Or his average monthly wage (as determined under subsec. (b)) is—		The amount referred to in the preceding paragraphs of this subsection shall be—	And the maximum amount of benefits payable (as provided in sec. 203(a)) on the basis of his wages and self-employment income shall be—
At least—	But not more than—		At least—	But not more than—		
		1232.60	2121	2125	1275.70	2232.40
		1234.00	2126	2130	1277.10	2235.00
		1235.40	2131	2135	1278.60	2237.40
		1236.70	2136	2140	1279.90	2240.00
		1237.90	2141	2145	1281.20	2242.30
		1239.50	2146	2150	1282.80	2245.00
		1240.70	2151	2155	1284.10	2247.30
		1242.10	2156	2160	1285.50	2249.80
		1243.40	2161	2165	1286.90	2252.10
		1244.60	2166	2170	1288.10	2254.20
		1245.80	2171	2175	1289.40	2256.50
		1247.00	2176	2180	1290.60	2258.50
		1248.20	2181	2185	1291.80	2260.80
		1249.30	2186	2190	1293.00	2262.90
		1250.50	2191	2195	1294.20	2265.00
		1251.70	2196	2200	1295.50	2267.20
		1252.90	2201	2205	1296.70	2269.40
		1254.20	2206	2210	1298.00	2271.60
		1255.30	2211	2215	1299.20	2273.70
		1256.50	2216	2220	1300.40	2275.90
		1257.70	2221	2225	1301.70	2278.10
		1258.90	2226	2230	1302.90	2280.30
		1260.10	2231	2235	1304.20	2282.40
		1261.30	2236	2240	1305.40	2284.40
		1262.40	2241	2245	1306.50	2286.70
		1263.70	2246	2250	1307.90	2288.70
		1264.90	2251	2255	1309.10	2291.00
		1266.10	2256	2260	1310.40	2293.10
		1267.30	2261	2265	1311.60	2295.40
		1268.50	2266	2270	1312.80	2297.40
		1269.60	2271	2275	1314.00	2299.60
		1270.80	2276	2280	1315.20	2301.80
		1272.00	2281	2285	1316.50	2304.00
		1273.30	2286	2290	1317.80	2306.10
		1274.50	2291	2295	1319.10	2308.30
		1275.60	2296	2300	1320.20	2310.50
		1276.80	2301	2305	1321.40	2312.70
		1278.00	2306	2310	1322.70	2314.80
		1279.20	2311	2315	1323.90	2317.00
		1280.40	2316	2320	1325.20	2319.10
		1281.60	2321	2325	1326.40	2321.40
		1282.70	2326	2330	1327.50	2323.40
		1284.00	2331	2335	1328.90	2325.70
		1285.20	2336	2340	1330.10	2327.80
		1286.40	2341	2345	1331.40	2330.00
		1287.60	2346	2350	1332.60	2332.10
		1288.80	2351	2355	1333.90	2334.40
		1289.90	2356	2360	1335.00	2336.50

**SUPERSEDED PROVISIONS—SOCIAL SECURITY ACT**

392 49 FR 43775

337 03/86

I (Primary insurance benefit under 1939 Act, as modified)		II (Primary insurance amount effective for June 1982)	III (Average monthly wage)		IV (Primary insurance amount)	V (Maximum family benefits)
If an individual's primary insurance benefit (as determined under subsec. (d)) is—		Or his primary insurance amount (as determined under subsec. (c)) is—	Or his average monthly wage (as determined under subsec. (b)) is—		The amount referred to in the preceding paragraphs of this subsection shall be—	And the maximum amount of benefits payable (as provided in sec. 203(a)) on the basis of his wages and self-employment income shall be—
At least—	But not more than—		At least—	But not more than—		
		1291.10	2361	2365	1336.20	2338.60
		1292.30	2366	2370	1337.50	2340.70
		1293.60	2371	2375	1338.80	2342.90
		1294.80	2376	2380	1340.10	2345.10
		1295.90	2381	2385	1341.20	2347.20
		1297.10	2386	2390	1342.40	2349.40
		1298.30	2391	2395	1343.70	2351.60
		1299.50	2396	2400	1344.90	2353.60
		1300.70	2401	2405	1346.20	2355.90
		1301.90	2406	2410	1347.40	2358.00
		1303.10	2411	2415	1348.70	2360.30
		1304.30	2416	2420	1349.90	2362.30
		1305.50	2421	2425	1351.10	2364.60
		1306.70	2426	2430	1352.40	2366.70
		1307.90	2431	2435	1353.60	2369.00
		1309.00	2436	2440	1354.80	2371.00
		1310.20	2441	2445	1356.00	2373.20
		1311.40	2446	2450	1357.20	2375.40
		1312.60	2451	2455	1358.50	2377.60
		1313.90	2456	2460	1359.80	2379.70
		1315.10	2461	2465	1361.10	2381.90
		1316.20	2466	2470	1362.20	2384.10
		1317.40	2471	2475	1363.50	2386.20
		1318.50	2476	2480	1364.60	2388.10
		1319.60	2481	2485	1365.70	2390.20
		1320.60	2486	2490	1366.80	2392.00
		1321.70	2491	2495	1367.90	2394.00
		1322.80	2496	2500	1369.00	2396.00
		1323.90	2501	2505	1370.20	2397.90
		1324.90	2506	2510	1371.20	2399.80
		1326.00	2511	2515	1372.40	2401.80
		1327.10	2516	2520	1373.50	2403.70
		1328.20	2521	2525	1374.60	2405.70
		1329.20	2526	2530	1375.70	2407.60
		1330.30	2531	2535	1376.80	2409.60
		1331.40	2536	2540	1377.90	2411.50
		1332.50	2541	2545	1379.10	2413.50
		1333.50	2546	2550	1380.10	2415.40
		1334.60	2551	2555	1381.30	2417.40
		1335.70	2556	2560	1382.40	2419.30
		1336.80	2561	2565	1383.50	2421.20
		1337.80	2566	2570	1384.60	2423.20
		1338.90	2571	2575	1385.70	2425.20
		1340.00	2576	2580	1386.90	2427.00
		1341.10	2581	2585	1388.00	2429.10
		1342.10	2586	2590	1389.00	2431.00
		1343.20	2591	2595	1390.20	2432.90
		1344.30	2596	2600	1391.30	2434.80



## SUPERSEDED PROVISIONS—SOCIAL SECURITY ACT

337 03/86 49 FR 43775 393

I (Primary insurance benefit under 1939 Act, as modified)		II (Primary insurance amount effective for June 1982)	III (Average monthly wage)		IV (Primary insurance amount)	V (Maximum family benefits)
If an individual's primary insurance benefit (as determined under subsec. (d)) is—		Or his primary insurance amount (as determined under subsec. (c)) is—	Or his average monthly wage (as determined under subsec. (b)) is—		The amount referred to in the preceding paragraphs of this subsection shall be—	And the maximum amount of benefits payable (as provided in sec. 203(a)) on the basis of his wages and self-employment income shall be—
At least—	But not more than—		At least—	But not more than—		
		1345.30	2601	2605	1392.30	2436.90
		1346.40	2606	2610	1393.50	2438.70
		1347.50	2611	2615	1394.60	2440.70
		1348.60	2616	2620	1395.80	2442.70
		1349.60	2621	2625	1396.80	2444.60
		1350.70	2626	2630	1397.90	2446.50
		1351.80	2631	2635	1399.10	2448.60
		1352.90	2636	2640	1400.20	2450.40
		1353.90	2641	2645	1401.20	2452.40
		1355.00	2646	2650	1402.40	2454.20
		1356.10	2651	2655	1403.50	2456.30
		1357.20	2656	2660	1404.70	2458.20
		1358.20	2661	2665	1405.70	2460.10
		1359.30	2666	2670	1406.80	2462.10
		1360.40	2671	2675	1408.00	2464.10
		1361.50	2676	2680	1409.10	2465.90
		1362.50	2681	2685	1410.10	2468.00
		1363.60	2686	2690	1411.30	2469.90
		1364.70	2691	2695	1412.40	2471.80
		1365.80	2696	2700	1413.60	2473.70
		1366.80	2701	2705	1414.60	2475.60
		1367.80	2706	2710	1415.60	2477.30
		1368.80	2711	2715	1416.70	2479.20
		1369.80	2716	2720	1417.70	2480.90
		1370.80	2721	2725	1418.70	2482.80
		1371.80	2726	2730	1419.80	2484.60
		1372.80	2731	2735	1420.80	2486.40
		1373.80	2736	2740	1421.80	2488.20
		1374.80	2741	2745	1422.90	2490.10
		1375.80	2746	2750	1423.90	2491.80
		1376.80	2751	2755	1424.90	2493.70
		1377.80	2756	2760	1426.00	2495.40
		1378.80	2761	2765	1427.00	2497.30
		1379.80	2766	2770	1428.00	2499.10
		1380.80	2771	2775	1429.10	2500.90
		1381.80	2776	2780	1430.10	2502.70
		1382.80	2781	2785	1431.10	2504.50
		1383.80	2786	2790	1432.20	2506.30
		1384.80	2791	2795	1433.20	2508.20
		1385.80	2796	2800	1434.30	2509.90
		1386.80	2801	2805	1435.30	2511.80
		1387.80	2806	2810	1436.30	2513.60
		1388.80	2811	2815	1437.40	2515.40
		1389.80	2816	2820	1438.40	2517.20
		1390.80	2821	2825	1439.40	2519.00
		1391.80	2826	2830	1440.50	2520.80
		1392.80	2831	2835	1441.50	2522.70
		1393.80	2836	2840	1442.50	2524.40

**SUPERSEDED PROVISIONS—SOCIAL SECURITY ACT**

394 49 FR 43775

337 03/86

I (Primary insurance benefit under 1939 Act, as modified)		II (Primary insurance amount ef- fective for June 1982)	III (Average monthly wage)		IV (Primary insurance amount)	V (Maximum family ben- efits)
If an individual's primary insurance benefit (as deter- mined under subsec. (d)) is—		Or his pri- mary insur- ance amount (as determined under sub- sec. (c)) is—	Or his average monthly wage (as de- termined under sub- sec. (b)) is—		The amount referred to in the pre- ceding para- graphs of this sub- section shall be—	And the maximum amount of benefits payable (as provided in sec. 203(a) on the basis of his wages and self- employ- ment in- come shall be—
At least—	But not more than—		At least—	But not more than—		
		1394.80	2841	2845	1443.60	2526.30
		1395.80	2846	2850	1444.60	2528.00
		1396.80	2851	2855	1445.60	2529.90
		1397.80	2856	2860	1446.70	2531.70
		1398.80	2861	2865	1447.70	2533.50
		1399.80	2866	2870	1448.70	2535.30
		1400.80	2871	2875	1449.80	2537.10
		1401.80	2876	2880	1450.80	2538.90
		1402.80	2881	2885	1451.80	2540.80
		1403.80	2886	2890	1452.90	2542.50
		1404.80	2891	2895	1453.90	2544.40
		1405.80	2896	2900	1455.00	2546.20
		1406.80	2901	2905	1456.00	2548.00
		1407.80	2906	2910	1457.00	2549.80
		1408.80	2911	2915	1458.10	2551.60
		1409.80	2916	2920	1459.10	2553.40
		1410.80	2921	2925	1460.10	2555.30
		1411.80	2926	2930	1461.20	2557.00
		1412.80	2931	2935	1462.20	2558.90
		1413.80	2936	2940	1463.20	2560.60
		1414.80	2941	2945	1464.30	2562.50
		1415.80	2946	2950	1465.30	2564.30
		1416.80	2951	2955	1466.30	2566.10
		1417.80	2956	2960	1467.40	2567.90
		1418.80	2961	2965	1468.40	2569.80
		1419.80	2966	2970	1469.40	2571.50
		1420.80	2971	2975	1470.50	2573.40

<sup>1</sup>This revised table of benefits was published in the Federal Register on June 13, 1983 (48 FR 27151), as required by P.L. 93-66, §203(f), which reads as follows:

"(f) Effective June 1, 1974, the Secretary of Health, Education, and Welfare, shall prescribe and publish in the Federal Register such modifications and extensions in the table contained in section 215(a) of the Social Security Act (which shall be determined in the same manner as the revisions in such table provided for under section 215(1)(2)(D) of such Act) as may be necessary to reflect the amendments made by this section; and such modified and extended table shall be deemed to be the table appearing in such section 215(a)."

This table was effective through November 1984. For the table effective beginning December 1984, see p. 397.

<sup>2</sup>The Federal Register of July 22, 1983 at 48 FR 33542 struck out "354.50" and substituted "352.50".

<sup>3</sup>The Federal Register of July 22, 1983 at 48 FR 33542 placed the line beginning with "32.61" in its proper sequence.

<sup>4</sup>The Federal Register of July 22, 1983 at 48 FR 33542 struck out "646.30" and substituted "464.30".

<sup>5</sup>As in original. Possibly should be "608.60".

<sup>6</sup>The Federal Register of July 22, 1983 at 48 FR 33542 struck out "534" and substituted "543".

<sup>7</sup>The Federal Register of July 22, 1983 at 48 FR 33542 struck out "1212.80" and substituted "1121.80".

<sup>8</sup>The Federal Register of July 22, 1983 at 48 FR 33542 struck out "1245.70" and substituted "1251.70".

<sup>9</sup>The Federal Register of July 22, 1983 at 48 FR 33542 struck out "2290.50" and substituted "2190.50".

# SUPERSEDED PROVISIONS—SOCIAL SECURITY ACT

337 03/86

49 FR 43775 395

<sup>10</sup>The Federal Register of July 22, 1983 at 48 FR 33542 struck out "2295.50" and substituted "2195.50".

<sup>11</sup>The Federal Register of July 22, 1983 at 48 FR 33542 struck out "12282.70" and substituted "1282.70".

<sup>12</sup>As in original. Possibly should be "1447.70".

TABLE 2.—SPECIAL MINIMUM PRIMARY INSURANCE AMOUNTS AND MAXIMUM FAMILY BENEFITS

Special minimum primary insurance amount payable for June 1982	No. of years required minimum earnings level	Special minimum primary insurance amount payable for Dec. 1982 <sup>1</sup>	Special maximum family benefit payable for Dec. 1983
17.50	11	18.10	27.20
34.60	12	35.80	53.80
51.90	13	53.70	80.70
69.10	14	71.50	107.40
86.30	15	89.30	134.10
103.70	16	107.30	161.00
120.90	17	125.10	187.60
138.20	18	143.00	214.50
155.40	19	160.80	241.20
172.50	20	178.50	267.90
189.90	21	196.50	294.90
207.10	22	214.30	321.60
224.50	23	232.30	348.60
241.70	24	250.10	375.20
258.90	25	267.90	401.90
276.30	26	285.90	429.00
293.50	27	303.70	455.70
310.70	28	321.50	482.40
327.90	29	339.30	509.10
345.10	30	357.10	535.80

<sup>1</sup>As in original. "1982" should read "1983"

## 【Cost-of-Living; Extension】

TABLE FOR DETERMINING PRIMARY INSURANCE AMOUNT AND MAXIMUM FAMILY BENEFITS BEGINNING JANUARY 1984<sup>1</sup>

I (Primary insurance benefit under 1939 Act, as modified)		II (Primary insurance amount effective for December 1983)	III (Average monthly wage)		IV (Primary insurance amount)	V (Maximum family benefits)
If an individual's primary insurance benefit (as determined under subsec. (d)) is—		Or his primary insurance amount (as determined under subsec. (c)) is—	Or his average monthly wage (as determined under subsec. (b)) is—		The amount referred to in the preceding paragraphs of this subsection shall be—	And the maximum amount of benefits payable (as provided in sec. 203(a)) on the basis of his wages and self-employment income shall be—
At least—	But not more than—		At least—	But not more than—		
			2976	2980	1471.50	2575.10
			2981	2985	1472.50	2576.80
			2986	2990	1473.50	2578.60
			2991	2995	1474.50	2580.30
			2996	3000	1475.50	2582.10
			3001	3005	1476.50	2583.80



**SUPERSEDED PROVISIONS—SOCIAL SECURITY ACT**

396 49 FR 43775

337 03/86

I (Primary insurance benefit under 1939 Act, as modified)		II (Primary insurance amount effective for December 1983)	III (Average monthly wage)		IV (Primary insurance amount)	V (Maximum family benefits)
If an individual's primary insurance benefit (as determined under subsec. (d)) is—		Or his primary insurance amount (as determined under subsec. (c)) is—	Or his average monthly wage (as determined under subsec. (b)) is—		The amount referred to in the preceding paragraphs of this subsection shall be—	And the maximum amount of benefits payable (as provided in sec. 203(a)) on the basis of his wages and self-employment income shall be—
At least—	But not more than—		At least—	But not more than—		
			3006	3010	1477.50	2585.60
			3011	3015	1478.50	2587.30
			3016	3020	1479.50	2589.10
			3021	3025	1480.50	2590.80
			3026	3030	1481.50	2592.60
			3031	3035	1482.50	2594.30
			3036	3040	1483.50	2596.10
			3041	3045	1484.50	2597.80
			3046	3050	1485.50	2599.60
			3051	3055	1486.50	2601.30
			3056	3060	1487.50	2603.10
			3061	3065	1488.50	2604.80
			3066	3070	1489.50	2606.60
			3071	3075	1490.50	2608.30
			3076	3080	1491.50	2610.10
			3081	3085	1492.50	2611.80
			3086	3090	1493.50	2613.60
			3091	3095	1494.50	2615.30
			3096	3100	1495.50	2617.10
			3101	3105	1496.50	2618.80
			3106	3110	1497.50	2620.60
			3111	3115	1498.50	2622.30
			3116	3120	1499.50	2624.10
			3121	3125	1500.50	2625.80
			3126	3130	1501.50	2627.60
			3131	3135	1502.50	2629.30
			3136	3140	1503.50	2631.10
			3141	3145	1504.50	2632.80
			3146	3150	1505.50	2634.60

<sup>1</sup>This extension was published at 48 FR 50414, November 1, 1983. This data was prepared and published as required by Social Security Act §215(a)(5) and §215(i)(2)(D).

**Provision of the Social Security Act as in Effect Prior to  
P.L. 98-620, Approved November 8, 1984 (98 Stat. 3335)  
[Title IV—Federal Courts Improvements]**

## SEC. 304.

(e) Any judicial proceedings under this section shall be entitled to, and, upon request of the Secretary or the State, shall receive a preference and shall be heard and determined as expeditiously as possible.

**Provision Deemed to be in Social Security Act as in Effect Prior to  
October 31, 1985 (50 Federal Register 45558)  
[Cost-of-Living Increase]**

## SEC. 215.

(a)

**TABLE 1.—TABLE FOR DETERMINING PRIMARY INSURANCE AMOUNT AND MAXIMUM  
FAMILY BENEFITS BEGINNING DECEMBER 1984<sup>1</sup>**

I (Primary insurance benefit under 1939 Act, as modified)		II (Primary insurance amount ef- fective for Dec. 1983)	III (Average monthly wage)		IV (Primary insurance amount)	V (Maximum family ben- efits)
If an individual's primary insurance benefit (as deter- mined under subsec. (d)) is—		Or his pri- mary insur- ance amount (as determined under sub- sec. (c)) is—	Or his average monthly wage (as de- termined under sub- sec. (b)) is—		The amount referred to in the pre- ceding para- graphs of this sub- section shall be—	And the maximum amount of benefits payable (as provided in sec. 203(a)) on the basis of his wages and self- employ- ment in- come shall be—
At least—	But not more than—		At least—	But not more than—		
	\$16.20	\$189.30		\$76	\$195.90	\$293.90
\$16.21	16.84	192.30	\$77	78	199.00	298.50
16.85	17.60	196.80	79	80	203.60	305.50
17.61	18.40	200.20	81	81	207.20	311.10
18.41	19.24	203.70	82	83	210.80	316.50
19.25	20.00	208.10	84	85	215.30	323.30
20.01	20.64	212.10	86	87	219.50	329.30
20.65	21.28	215.30	88	89	222.80	334.40
21.29	21.88	219.70	90	90	227.30	341.10
21.89	22.28	223.40	91	92	231.20	347.00
22.29	22.68	227.00	93	94	234.90	352.50
22.69	23.08	230.80	95	96	238.80	358.40
23.09	23.44	234.90	97	97	243.10	364.80
23.45	23.76	238.80	98	99	247.10	370.80
23.77	24.20	243.50	100	101	252.00	378.00
24.21	24.60	246.80	102	102	255.40	383.30
24.61	25.00	250.90	103	104	259.60	389.50
25.01	25.48	255.60	105	106	264.50	396.90
25.49	25.92	259.80	107	107	268.80	403.40
25.93	26.40	263.80	108	109	273.00	409.50
26.41	26.94	267.90	110	113	277.20	415.90
26.95	27.46	271.60	114	118	281.10	421.80
27.47	28.00	275.80	119	122	285.40	428.10
28.01	28.68	280.10	123	127	289.90	435.00
28.69	29.25	284.30	128	132	294.20	441.30

**SUPERSEDED PROVISIONS—SOCIAL SECURITY ACT**

398 50 FR 45558

337 03/86

I (Primary insurance benefit under 1939 Act, as modified)		II (Primary insurance amount ef- fective for Dec. 1983)	III (Average monthly wage)		IV (Primary insurance amount)	V (Maximum family ben- efits)
If an individual's primary insurance benefit (as deter- mined under subsec. (d)) is—		Or his pri- mary insur- ance amount (as determined under sub- sec. (c)) is—	Or his average monthly wage (as de- termined under sub- sec. (b)) is—		The amount referred to in the pre- ceding para- graphs of this sub- section shall be—	And the maximum amount of benefits payable (as provided in sec. 203(a)) on the basis of his wages and self- employ- ment in- come shall be—
At least—	But not more than—		At least—	But not more than—		
29.26	29.68	288.10	133	136	298.10	447.40
29.69	30.36	292.00	137	141	302.20	453.50
30.37	30.92	296.30	142	146	306.60	459.90
30.93	31.36	300.70	147	150	311.20	466.80
31.37	32.00	304.10	151	155	314.70	472.20
32.01	32.60	308.60	156	160	319.40	479.20
32.61	33.20	312.70	161	164	323.60	485.50
33.21	33.88	316.60	165	169	327.60	491.60
33.89	34.50	320.90	170	174	332.10	498.30
34.51	35.00	324.80	175	178	336.10	504.30
35.01	35.80	329.20	179	183	340.70	511.00
35.81	36.40	333.00	184	188	344.60	517.00
36.41	37.08	337.40	189	193	349.20	524.00
37.09	37.60	341.50	194	197	353.40	530.30
37.61	38.20	345.50	198	202	357.50	536.50
38.21	39.12	350.10	203	207	362.30	543.40
39.13	39.68	354.00	208	211	366.30	549.70
39.69	40.33	357.20	212	216	369.70	554.70
40.34	41.12	361.80	217	221	374.40	561.70
41.13	41.76	365.90	222	225	378.70	568.20
41.77	42.44	370.40	226	230	383.30	575.10
42.45	43.20	374.40	231	235	387.50	581.50
43.21	43.76	379.00	236	239	392.20	588.50
43.77	44.44	382.50	240	244	395.80	596.40
44.45	44.88	386.20	245	249	399.70	608.80
44.89	45.60	391.10	250	253	404.70	618.80
		394.80	254	258	408.60	630.80
		398.30	259	263	412.20	642.80
		403.30	264	267	417.40	652.50
		406.90	268	272	421.10	664.90
		411.40	273	277	425.70	676.80
		415.30	278	281	429.80	686.60
		419.40	282	286	434.00	698.90
		423.90	287	291	438.70	711.30
		427.30	292	295	442.20	720.80
		432.00	296	300	447.10	732.90
		436.00	301	305	451.20	745.50
		439.70	306	309	455.00	755.10
		444.20	310	314	459.70	767.20
		447.80	315	319	463.40	779.60
		451.90	320	323	467.70	789.20
		456.20	324	328	472.10	801.40
		460.00	329	333	476.10	813.60
		464.90	334	337	481.10	823.70
		468.10	338	342	484.40	835.60
		472.50	343	347	489.00	847.90
		477.00	348	351	493.60	857.60
		480.50	352	356	497.30	869.80



## SUPERSEDED PROVISIONS—SOCIAL SECURITY ACT

337

03/86

50 FR 45558

399

I (Primary insurance benefit under 1939 Act, as modified)		II (Primary insurance amount ef- fective for Dec. 1983)	III (Average monthly wage)		IV (Primary insurance amount)	V (Maximum family ben- efits)
If an individual's primary insurance benefit (as deter- mined under subsec. (d)) is—		Or his pri- mary insur- ance amount (as determined under sub- sec. (c)) is—	Or his average monthly wage (as de- termined under sub- sec. (b)) is—		The amount referred to in the pre- ceding para- graphs of this sub- section shall be—	And the maximum amount of benefits payable (as provided in sec. 203(a)) on the basis of his wages and self- employ- ment in- come shall be—
At least—	But not more than—		At least—	But not more than—		
		485.30	357	361	502.20	882.10
		489.00	362	365	506.10	891.80
		492.80	366	370	510.00	904.00
		497.30	371	375	514.70	915.90
		501.40	376	379	518.90	926.10
		505.70	380	384	523.30	938.40
		509.40	385	389	527.20	950.40
		513.30	390	393	531.20	960.00
		517.90	394	398	536.00	972.50
		521.80	399	403	540.00	984.60
		526.20	404	407	544.60	994.20
		529.80	408	412	548.30	1006.60
		533.50	413	417	552.10	1018.60
		537.20	418	421	556.00	1028.40
		541.60	422	426	560.50	1040.70
		545.30	427	431	564.30	1052.90
		548.60	432	436	567.80	1065.20
		553.20	437	440	572.50	1069.90
		556.60	441	445	576.00	1076.40
		560.40	446	450	580.00	1082.20
		564.40	451	454	584.10	1086.90
		568.30	455	459	588.10	1093.00
		571.90	460	464	591.90	1098.90
		575.50	465	468	595.60	1104.20
		580.10	469	473	600.40	1110.10
		583.30	474	478	603.70	1116.30
		587.00	479	482	607.50	1121.30
		591.10	483	487	611.70	1127.60
		595.10	488	492	615.90	1133.70
		598.60	493	496	619.50	1138.60
		602.90	497	501	624.00	1144.30
		606.40	502	506	627.60	1150.40
		610.10	507	510	631.40	1155.40
		613.90	511	515	635.30	1161.50
		618.20	516	520	639.80	1167.90
		621.70	521	524	643.40	1172.50
		625.30	525	529	647.10	1178.70
		629.90	530	534	651.90	1184.70
		633.10	535	538	655.20	1189.60
		637.10	539	543	659.30	1195.80
		640.90	544	548	663.30	1201.90
		645.00	549	553	667.50	1208.00
		648.50	554	556	671.10	1211.50
		651.60	557	560	674.40	1216.50
		655.20	561	563	678.10	1220.20
		658.50	564	567	681.50	1225.20
		662.50	568	570	685.60	1228.60
		665.60	571	574	688.80	1233.50

**SUPERSEDED PROVISIONS—SOCIAL SECURITY ACT**

400      50 FR 45558 337      03/86

I (Primary insurance benefit under 1939 Act, as modified)		II (Primary insurance amount effective for Dec. 1983)	III (Average monthly wage)		IV (Primary insurance amount)	V (Maximum family benefits)
If an individual's primary insurance benefit (as determined under subsec. (d)) is—		Or his primary insurance amount (as determined under subsec. (c)) is—	Or his average monthly wage (as determined under subsec. (b)) is—		The amount referred to in the preceding paragraphs of this subsection shall be—	And the maximum amount of benefits payable (as provided in sec. 203(a)) on the basis of his wages and self-employment income shall be—
At least—	But not more than—		At least—	But not more than—		
		668.90	575	577	692.30	1237.50
		672.00	578	581	695.50	1242.00
		675.50	582	584	699.10	1245.90
		678.40	585	588	702.10	1250.70
		682.50	589	591	706.30	1254.30
		685.80	592	595	709.80	1259.20
		689.20	596	598	713.30	1262.50
		692.60	599	602	716.80	1267.90
		695.90	603	605	720.20	1271.40
		699.20	606	609	723.60	1276.00
		702.80	610	612	727.30	1280.00
		706.10	613	616	730.80	1284.80
		709.40	617	620	734.20	1289.80
		713.00	621	623	737.90	1293.30
		716.10	624	627	741.10	1298.40
		719.70	628	630	744.80	1302.90
		723.00	631	634	748.30	1309.30
		726.50	635	637	751.90	1315.40
		730.00	638	641	755.50	1321.70
		733.20	642	644	758.80	1327.60
		736.70	645	648	762.40	1334.00
		739.90	649	652	765.70	1339.90
		742.10	653	656	768.00	1343.80
		744.20	657	660	770.20	1347.40
		746.80	661	665	772.90	1352.50
		749.40	666	670	775.60	1357.40
		752.20	671	675	778.50	1361.80
		755.00	676	680	781.40	1366.80
		757.50	681	685	784.00	1371.60
		760.50	686	690	787.10	1376.20
		762.80	691	695	789.40	1381.60
		765.30	696	700	792.00	1386.10
		768.20	701	705	795.00	1391.00
		770.90	706	710	797.80	1396.00
		773.80	711	715	800.80	1400.50
		776.30	716	720	803.40	1405.60
		779.00	721	725	806.20	1410.30
		781.80	726	730	809.10	1415.40
		784.40	731	735	811.80	1420.30
		787.20	736	740	814.70	1424.90
		789.70	741	745	817.30	1430.10
		792.00	746	750	819.70	1434.50
		794.70	751	755	822.50	1439.00
		797.00	756	760	824.80	1442.80
		799.30	761	765	827.20	1447.00
		801.10	766	770	829.10	1451.20
		803.60	771	775	831.70	1455.00
		805.80	776	780	834.00	1459.00

## SUPERSEDED PROVISIONS—SOCIAL SECURITY ACT

337 03/86

50 FR 45558

401

I (Primary insurance benefit under 1939 Act, as modified)		II (Primary insurance amount ef- fective for Dec. 1983)	III (Average monthly wage)		IV (Primary insurance amount)	V (Maximum family ben- efits)
If an individual's primary insurance benefit (as deter- mined under subsec. (d)) is—		Or his pri- mary in- surance amount (as determined under sub- sec. (c)) is—	Or his average monthly wage (as de- termined under sub- sec. (b)) is—		The amount referred to in the pre- ceding para- graphs of this sub- section shall be—	And the maximum amount of benefits payable (as provided in sec. 203(a)) on the basis of his wages and self- employ- ment in- come shall be—
At least—	But not more than—		At least—	But not more than—		
		808.20	781	785	836.40	1463.10
		810.10	786	790	838.40	1467.10
		812.30	791	795	840.70	1471.10
		814.70	796	800	843.20	1475.20
		817.00	801	805	845.50	1479.40
		819.30	806	810	847.90	1483.30
		821.40	811	815	850.10	1487.60
		823.70	816	820	852.50	1491.40
		825.90	821	825	854.80	1495.60
		828.20	826	830	857.10	1499.50
		830.30	831	835	859.30	1503.80
		832.50	836	840	861.60	1507.50
		834.80	841	845	864.00	1512.00
		836.90	846	850	866.10	1515.50
		839.30	851	855	868.60	1519.80
		841.50	856	860	870.90	1523.80
		843.70	861	865	873.20	1527.90
		846.10	866	870	875.70	1532.00
		848.20	871	875	877.80	1536.00
		850.40	876	880	880.10	1539.90
		852.70	881	885	882.50	1544.20
		854.80	886	890	884.70	1547.90
		857.00	891	895	886.90	1552.60
		859.30	896	900	889.30	1556.10
		861.70	901	905	891.80	1560.30
		863.90	906	910	894.10	1564.50
		866.10	911	915	896.40	1568.50
		868.60	916	920	899.00	1572.20
		870.50	921	925	900.90	1576.70
		872.60	926	930	903.10	1580.40
		874.80	931	935	905.40	1584.50
		877.20	936	940	907.90	1588.60
		879.40	941	945	910.10	1592.70
		881.60	946	950	912.40	1596.60
		884.00	951	955	914.90	1600.90
		886.50	956	960	917.50	1604.90
		888.70	961	965	919.80	1608.70
		890.40	966	970	921.50	1613.00
		892.70	971	975	923.90	1617.10
		894.90	976	980	926.20	1620.90
		897.50	981	985	928.90	1624.90
		899.50	986	990	930.90	1629.00
		901.70	991	995	933.20	1633.20
		904.10	996	1000	935.70	1637.00
		906.20	1001	1005	937.90	1640.50
		907.70	1006	1010	939.40	1644.40
		910.00	1011	1015	941.80	1647.80
		912.20	1016	1020	944.10	1651.80



## SUPERSEDED PROVISIONS—SOCIAL SECURITY ACT

402 50 FR 45558

337 03/86

I (Primary insurance benefit under 1939 Act, as modified)		II (Primary insurance amount effective for Dec. 1983)	III (Average monthly wage)		IV (Primary insurance amount)	V (Maximum family benefits)
If an individual's primary insurance benefit (as determined under subsec. (d)) is—		Or his primary insurance amount (as determined under subsec. (c)) is—	Or his average monthly wage (as determined under subsec. (b)) is—		The amount referred to in the preceding paragraphs of this subsection shall be—	And the maximum amount of benefits payable (as provided in sec. 203(a)) on the basis of his wages and self-employment income shall be—
At least—	But not more than—		At least—	But not more than—		
		914.10	1021	1025	946.00	1655.10
		915.70	1026	1030	947.70	1659.00
		918.10	1031	1035	950.20	1662.60
		920.00	1036	1040	952.20	1666.10
		922.00	1041	1045	954.20	1670.00
		924.30	1046	1050	956.60	1673.40
		925.90	1051	1055	958.30	1676.70
		927.90	1056	1060	960.30	1680.90
		930.20	1061	1065	962.70	1684.30
		932.20	1066	1070	964.80	1688.00
		934.10	1071	1075	966.70	1691.80
		936.10	1076	1080	968.80	1695.30
		938.30	1081	1085	971.10	1698.90
		940.00	1086	1090	972.90	1702.50
		942.20	1091	1095	975.10	1706.30
		944.40	1096	1100	977.40	1710.10
		946.00	1101	1105	979.10	1713.40
		948.20	1106	1110	981.30	1717.20
		950.30	1111	1115	983.50	1720.60
		952.20	1116	1120	985.50	1724.60
		954.30	1121	1125	987.70	1728.00
		956.20	1126	1130	989.60	1731.70
		958.20	1131	1135	991.70	1735.10
		960.30	1136	1140	993.90	1739.20
		962.50	1141	1145	996.10	1742.80
		964.50	1146	1150	998.20	1746.30
		966.10	1151	1155	999.90	1749.70
		968.40	1156	1160	1002.20	1753.40
		970.50	1161	1165	1004.40	1757.30
		972.40	1166	1170	1006.40	1761.00
		974.50	1171	1175	1008.60	1764.60
		976.40	1176	1180	1010.50	1768.20
		978.10	1181	1185	1012.30	1771.40
		980.10	1186	1190	1014.40	1774.70
		981.80	1191	1195	1016.10	1778.30
		983.70	1196	1200	1018.10	1781.70
		985.70	1201	1205	1020.10	1784.90
		987.50	1206	1210	1022.00	1788.50
		989.30	1211	1215	1023.90	1791.70
		991.20	1216	1220	1025.80	1795.10
		993.10	1221	1225	1027.80	1798.30
		995.10	1226	1230	1029.90	1801.90
		996.80	1231	1235	1031.60	1805.10
		998.50	1236	1240	1033.40	1808.60
		1000.60	1241	1245	1035.60	1812.10
		1002.50	1246	1250	1037.50	1815.40
		1004.20	1251	1255	1039.30	1818.70
		1006.10	1256	1260	1041.30	1822.20

## SUPERSEDED PROVISIONS—SOCIAL SECURITY ACT

337 03/86

50 FR 45558

403

I (Primary insurance benefit under 1939 Act, as modified)		II (Primary insurance amount effective for Dec. 1983)	III (Average monthly wage)		IV (Primary insurance amount)	V (Maximum family benefits)
If an individual's primary insurance benefit (as determined under subsec. (d)) is—		Or his primary insurance amount (as determined under subsec. (c)) is—	Or his average monthly wage (as determined under subsec. (b)) is—		The amount referred to in the preceding paragraphs of this subsection shall be—	And the maximum amount of benefits payable (as provided in sec. 203(a) on the basis of his wages and self-employment income shall be—
At least—	But not more than—		At least—	But not more than—		
		1008.10	1261	1265	1043.30	1825.60
		1009.90	1266	1270	1045.20	1828.90
		1011.60	1271	1275	1047.00	1832.00
		1013.50	1276	1280	1048.90	1835.60
		1015.10	1281	1285	1050.60	1838.60
		1017.00	1286	1290	1052.50	1841.80
		1018.90	1291	1295	1054.50	1844.90
		1020.50	1296	1300	1056.20	1848.10
		1022.20	1301	1305	1057.90	1851.30
		1023.90	1306	1310	1059.70	1854.50
		1025.70	1311	1315	1061.50	1857.60
		1027.70	1316	1320	1063.60	1861.00
		1029.30	1321	1325	1065.30	1863.90
		1031.10	1326	1330	1067.10	1867.40
		1032.70	1331	1335	1068.80	1870.50
		1034.50	1336	1340	1070.70	1873.70
		1036.30	1341	1345	1072.50	1876.80
		1038.00	1346	1350	1074.30	1879.90
		1039.80	1351	1355	1076.10	1883.00
		1041.50	1356	1360	1077.90	1886.20
		1043.40	1361	1365	1079.90	1889.30
		1044.90	1366	1370	1081.40	1892.60
		1046.70	1371	1375	1083.30	1895.70
		1048.60	1376	1380	1085.30	1898.90
		1050.10	1381	1385	1086.80	1901.80
		1051.80	1386	1390	1088.60	1904.90
		1053.40	1391	1395	1090.20	1907.90
		1054.90	1396	1400	1091.80	1910.90
		1056.70	1401	1405	1093.60	1913.70
		1058.20	1406	1410	1095.20	1916.80
		1059.90	1411	1415	1096.90	1919.80
		1061.50	1416	1420	1098.60	1922.90
		1063.20	1421	1425	1100.40	1925.90
		1064.80	1426	1430	1102.00	1928.90
		1066.70	1431	1435	1104.00	1931.80
		1068.40	1436	1440	1105.70	1934.80
		1069.90	1441	1445	1107.30	1937.70
		1071.70	1446	1450	1109.20	1941.00
		1073.20	1451	1455	1110.70	1943.80
		1074.80	1456	1460	1112.40	1946.90
		1076.60	1461	1465	1114.20	1949.80
		1078.10	1466	1470	1115.80	1952.80
		1079.80	1471	1475	1117.50	1955.80
		1081.30	1476	1480	1119.10	1958.50
		1083.10	1481	1485	1121.00	1961.50
		1084.50	1486	1490	1122.40	1964.10
		1086.20	1491	1495	1124.20	1967.10
		1087.60	1496	1500	1125.60	1969.90

**SUPERSEDED PROVISIONS—SOCIAL SECURITY ACT**

404

50 FR 45558

337

03/86

I (Primary insurance benefit under 1939 Act, as modified)		II (Primary insurance amount effective for Dec. 1983)	III (Average monthly wage)		IV (Primary insurance amount)	V (Maximum family benefits)
If an individual's primary insurance benefit (as determined under subsec. (d)) is—		Or his primary insurance amount (as determined under subsec. (c)) is—	Or his average monthly wage (as determined under subsec. (b)) is—		The amount referred to in the preceding paragraphs of this subsection shall be—	And the maximum amount of benefits payable (as provided in sec. 203(a)) on the basis of his wages and self-employment income shall be—
At least—	But not more than—		At least—	But not more than—		
		1089.20	1501	1505	1127.30	1972.90
		1090.70	1506	1510	1128.80	1975.40
		1092.30	1511	1515	1130.50	1978.20
		1093.90	1516	1520	1132.10	1981.10
		1095.40	1521	1525	1133.70	1984.10
		1096.90	1526	1530	1135.20	1986.60
		1098.50	1531	1535	1136.90	1989.50
		1100.10	1536	1540	1138.60	1992.40
		1101.60	1541	1545	1140.10	1995.20
		1103.20	1546	1550	1141.80	1997.90
		1104.80	1551	1555	1143.40	2000.80
		1106.30	1556	1560	1145.00	2003.60
		1107.80	1561	1565	1146.50	2006.50
		1109.40	1566	1570	1148.20	2009.10
		1110.90	1571	1575	1149.70	2012.10
		1112.40	1576	1580	1151.30	2014.90
		1114.00	1581	1585	1152.90	2017.70
		1115.60	1586	1590	1154.60	2020.40
		1117.10	1591	1595	1156.10	2023.40
		1118.70	1596	1600	1157.80	2026.20
		1120.20	1601	1605	1159.40	2029.00
		1121.80	1606	1610	1161.00	2031.60
		1123.20	1611	1615	1162.50	2034.60
		1124.90	1616	1620	1164.20	2037.30
		1126.40	1621	1625	1165.80	2040.20
		1128.10	1626	1630	1167.50	2042.90
		1129.70	1631	1635	1169.20	2045.90
		1131.10	1636	1640	1170.60	2048.50
		1132.80	1641	1645	1172.40	2051.50
		1134.30	1646	1650	1174.00	2054.20
		1135.90	1651	1655	1175.60	2057.10
		1137.40	1656	1660	1177.20	2059.80
		1138.90	1661	1665	1178.70	2062.60
		1140.50	1666	1670	1180.40	2065.40
		1142.00	1671	1675	1181.90	2068.30
		1143.60	1676	1680	1183.60	2071.10
		1145.20	1681	1685	1185.20	2074.00
		1146.70	1686	1690	1186.80	2076.70
		1148.30	1691	1695	1188.40	2079.60
		1149.60	1696	1700	1189.80	2082.40
		1151.30	1701	1705	1191.50	2085.30
		1152.70	1706	1710	1193.00	2088.00
		1154.30	1711	1715	1194.70	2090.80
		1155.80	1716	1720	1196.20	2093.50
		1157.40	1721	1725	1197.90	2096.50
		1159.00	1726	1730	1199.50	2099.10
		1160.50	1731	1735	1201.10	2102.00
		1162.20	1736	1740	1202.80	2104.70



## SUPERSEDED PROVISIONS—SOCIAL SECURITY ACT

337 03/86

50 FR 45558

405

I (Primary insurance benefit under 1939 Act, as modified)		II (Primary insurance amount eff- ective for Dec. 1983)	III (Average monthly wage)		IV (Primary insurance amount)	V (Maximum family ben- efits)
If an individual's primary insurance benefit (as deter- mined under subsec. (d)) is—		Or his pri- mary insur- ance amount (as determined under sub- sec. (c)) is—	Or his average monthly wage (as de- termined under sub- sec. (b)) is—		The amount referred to in the pre- ceding para- graphs of this sub- section shall be—	And the maximum amount of benefits payable (as provided in sec. 203(a)) on the basis of his wages and self- employ- ment in- come shall be—
At least—	But not more than—		At least—	But not more than—		
		1163.60	1741	1745	1204.30	2107.70
		1165.20	1746	1750	1205.90	2110.40
		1166.70	1751	1755	1207.50	2113.30
		1168.30	1756	1760	1209.10	2116.10
		1169.90	1761	1765	1210.80	2119.10
		1171.40	1766	1770	1212.30	2121.60
		1172.90	1771	1775	1213.90	2124.50
		1174.50	1776	1780	1215.60	2127.40
		1176.00	1781	1785	1217.10	2130.40
		1177.70	1786	1790	1218.90	2132.80
		1179.20	1791	1795	1220.40	2135.70
		1180.80	1796	1800	1222.10	2138.60
		1182.30	1801	1805	1223.60	2141.50
		1183.90	1806	1810	1225.30	2144.20
		1185.40	1811	1815	1226.80	2147.10
		1187.00	1816	1820	1228.50	2149.90
		1188.40	1821	1825	1229.90	2152.80
		1190.10	1826	1830	1231.70	2155.30
		1191.60	1831	1835	1233.30	2158.30
		1193.20	1836	1840	1234.90	2161.20
		1194.80	1841	1845	1236.60	2164.10
		1196.20	1846	1850	1238.00	2166.50
		1197.90	1851	1855	1239.80	2169.50
		1199.30	1856	1860	1241.20	2172.30
		1201.00	1861	1865	1243.00	2175.20
		1202.50	1866	1870	1244.50	2177.80
		1204.00	1871	1875	1246.10	2180.80
		1205.60	1876	1880	1247.70	2183.60
		1207.10	1881	1885	1249.30	2186.50
		1208.70	1886	1890	1251.00	2189.20
		1210.20	1891	1895	1252.50	2192.20
		1211.80	1896	1900	1254.20	2194.90
		1213.40	1901	1905	1255.80	2197.80
		1214.80	1906	1910	1257.30	2200.40
		1216.40	1911	1915	1258.90	2203.10
		1217.70	1916	1920	1260.30	2205.70
		1219.10	1921	1925	1261.70	2208.20
		1220.50	1926	1930	1263.20	2210.90
		1222.00	1931	1935	1264.70	2213.30
		1223.40	1936	1940	1266.20	2216.10
		1224.80	1941	1945	1267.60	2218.50
		1226.30	1946	1950	1269.20	2221.10
		1227.70	1951	1955	1270.60	2223.50
		1229.00	1956	1960	1272.00	2226.30
		1230.50	1961	1965	1273.50	2228.70
		1231.90	1966	1970	1275.00	2231.40
		1233.40	1971	1975	1276.50	2233.70
		1234.60	1976	1980	1277.80	2236.40

## SUPERSEDED PROVISIONS—SOCIAL SECURITY ACT

406 50 FR 45558

337 03/86

I (Primary insurance benefit under 1939 Act, as modified)		II (Primary insurance amount effective for Dec. 1983)	III (Average monthly wage)		IV (Primary insurance amount)	V (Maximum family benefits)
If an individual's primary insurance benefit (as determined under subsec. (d)) is—		Or his primary insurance amount (as determined under subsec. (c)) is—	Or his average monthly wage (as determined under subsec. (b)) is—		The amount referred to in the preceding paragraphs of this subsection shall be—	And the maximum amount of benefits payable (as provided in sec. 203(a)) on the basis of his wages and self-employment income shall be—
At least—	But not more than—		At least—	But not more than—		
		1236.30	1981	1985	1279.50	2239.00
		1237.50	1986	1990	1280.80	2241.60
		1238.80	1991	1995	1282.10	2244.00
		1240.30	1996	2000	1283.70	2246.70
		1241.70	2001	2005	1285.10	2249.10
		1243.20	2006	2010	1286.70	2251.80
		1244.50	2011	2015	1288.00	2254.30
		1246.10	2016	2020	1289.70	2256.90
		1247.40	2021	2025	1291.00	2259.50
		1248.80	2026	2030	1292.50	2262.10
		1250.20	2031	2035	1293.90	2264.40
		1251.70	2036	2040	1295.50	2267.10
		1253.10	2041	2045	1296.90	2269.50
		1254.50	2046	2050	1298.40	2272.30
		1256.00	2051	2055	1299.90	2274.80
		1257.40	2056	2060	1301.40	2277.40
		1258.60	2061	2065	1302.60	2279.70
		1260.10	2066	2070	1304.20	2282.50
		1261.50	2071	2075	1305.60	2284.90
		1263.00	2076	2080	1307.20	2287.60
		1264.30	2081	2085	1308.50	2290.10
		1265.80	2086	2090	1310.10	2292.80
		1267.20	2091	2095	1311.50	2295.20
		1268.50	2096	2100	1312.80	2297.90
		1270.00	2101	2105	1314.40	2300.20
		1271.40	2106	2110	1315.80	2303.00
		1272.90	2111	2115	1317.40	2305.40
		1274.20	2116	2120	1318.70	2308.10
		1275.70	2121	2125	1320.30	2310.50
		1277.10	2126	2130	1321.70	2313.20
		1278.60	2131	2135	1323.30	2315.70
		1279.90	2136	2140	1324.60	2318.40
		1281.20	2141	2145	1326.00	2320.70
		1282.80	2146	2150	1327.60	2323.50
		1284.10	2151	2155	1329.00	2325.90
		1285.50	2156	2160	1330.40	2328.50
		1286.90	2161	2165	1331.90	2330.90
		1288.10	2166	2170	1333.10	2333.00
		1289.40	2171	2175	1334.50	2335.40
		1290.60	2176	2180	1335.70	2337.50
		1291.80	2181	2185	1337.00	2339.90
		1293.00	2186	2190	1338.20	2342.10
		1294.20	2191	2195	1339.40	2344.20
		1295.50	2196	2200	1340.80	2346.50
		1296.70	2201	2205	1342.00	2348.80
		1298.00	2206	2210	1343.40	2351.10
		1299.20	2211	2215	1344.60	2353.20
		1300.40	2216	2220	1345.90	2355.50

## SUPERSEDED PROVISIONS—SOCIAL SECURITY ACT

337 03/86

50 FR 45558

407

I (Primary insurance benefit under 1939 Act, as modified)		II (Primary insurance amount effective for Dec. 1983)	III (Average monthly wage)		IV (Primary insurance amount)	V (Maximum family benefits)
If an individual's primary insurance benefit (as determined under subsec. (d)) is—		Or his primary insurance amount (as determined under subsec. (c)) is—	Or his average monthly wage (as determined under subsec. (b)) is—		The amount referred to in the preceding paragraphs of this subsection shall be—	And the maximum amount of benefits payable (as provided in sec. 203(a)) on the basis of his wages and self-employment income shall be—
At least—	But not more than—		At least—	But not more than—		
		1301.70	2221	2225	1347.20	2357.80
		1302.90	2226	2230	1348.50	2360.10
		1304.20	2231	2235	1349.80	2362.20
		1305.40	2236	2240	1351.00	2364.30
		1306.50	2241	2245	1352.20	2366.70
		1307.90	2246	2250	1353.60	2368.80
		1309.10	2251	2255	1354.90	2371.10
		1310.40	2256	2260	1356.20	2373.30
		1311.60	2261	2265	1357.50	2375.70
		1312.80	2266	2270	1358.70	2377.80
		1314.00	2271	2275	1359.90	2380.00
		1315.20	2276	2280	1361.20	2382.30
		1316.50	2281	2285	1362.50	2384.60
		1317.80	2286	2290	1363.90	2386.80
		1319.10	2291	2295	1365.20	2389.00
		1320.20	2296	2300	1366.40	2391.30
		1321.40	2301	2305	1367.60	2393.60
		1322.70	2306	2310	1368.90	2395.80
		1323.90	2311	2315	1370.20	2398.00
		1325.20	2316	2320	1371.50	2400.20
		1326.40	2321	2325	1372.80	2402.60
		1327.50	2326	2330	1373.90	2404.70
		1328.90	2331	2335	1375.40	2407.00
		1330.10	2336	2340	1376.60	2409.20
		1331.40	2341	2345	1377.90	2411.50
		1332.60	2346	2350	1379.20	2413.70
		1333.90	2351	2355	1380.50	2416.10
		1335.00	2356	2360	1381.70	2418.20
		1336.20	2361	2365	1382.90	2420.40
		1337.50	2366	2370	1384.30	2422.60
		1338.80	2371	2375	1385.60	2424.90
		1340.10	2376	2380	1387.00	2427.10
		1341.20	2381	2385	1388.10	2429.30
		1342.40	2386	2390	1389.30	2431.60
		1343.70	2391	2395	1390.70	2433.90
		1344.90	2396	2400	1391.90	2435.90
		1346.20	2401	2405	1393.30	2438.30
		1347.40	2406	2410	1394.50	2440.50
		1348.70	2411	2415	1395.90	2442.90
		1349.90	2416	2420	1397.10	2444.90
		1351.10	2421	2425	1398.30	2447.30
		1352.40	2426	2430	1399.70	2449.50
		1353.60	2431	2435	1400.90	2451.90
		1354.80	2436	2440	1402.20	2453.90
		1356.00	2441	2445	1403.40	2456.20
		1357.20	2446	2450	1404.70	2458.50
		1358.50	2451	2455	1406.00	2460.80
		1359.80	2456	2460	1407.30	2462.90



## SUPERSEDED PROVISIONS—SOCIAL SECURITY ACT

408 50 FR 45558

337 03/86

I (Primary insurance benefit under 1939 Act, as modified)		II (Primary insurance amount effective for Dec. 1983)	III (Average monthly wage)		IV (Primary insurance amount)	V (Maximum family benefits)
If an individual's primary insurance benefit (as determined under subsec. (d)) is—		Or his primary insurance amount (as determined under subsec. (c)) is—	Or his average monthly wage (as determined under subsec. (b)) is—		The amount referred to in the preceding paragraphs of this subsection shall be—	And the maximum amount of benefits payable (as provided in sec. 203(a)) on the basis of his wages and self-employment income shall be—
At least—	But not more than—		At least—	But not more than—		
		1361.10	2461	2465	1408.70	2465.20
		1362.20	2466	2470	1409.80	2467.50
		1363.50	2471	2475	1411.20	2469.70
		1364.60	2476	2480	1412.30	2471.60
		1365.70	2481	2485	1413.40	2473.80
		1366.80	2486	2490	1414.60	2475.70
		1367.90	2491	2495	1415.70	2477.70
		1369.00	2496	2500	1416.90	2479.80
		1370.20	2501	2505	1418.10	2481.80
		1371.20	2506	2510	1419.10	2483.70
		1372.40	2511	2515	1420.40	2485.80
		1373.50	2516	2520	1421.50	2487.80
		1374.60	2521	2525	1422.70	2489.80
		1375.70	2526	2530	1423.80	2491.80
		1376.80	2531	2535	1424.90	2493.90
		1377.90	2536	2540	1426.10	2495.90
		1379.10	2541	2545	1427.30	2497.90
		1380.10	2546	2550	1428.40	2499.90
		1381.30	2551	2555	1429.60	2502.00
		1382.40	2556	2560	1430.70	2503.90
		1383.50	2561	2565	1431.90	2505.90
		1384.60	2566	2570	1433.00	2508.00
		1385.70	2571	2575	1434.10	2510.00
		1386.90	2576	2580	1435.40	2511.90
		1388.00	2581	2585	1436.50	2514.10
		1389.00	2586	2590	1437.60	2516.00
		1390.20	2591	2595	1438.80	2518.00
		1391.30	2596	2600	1439.90	2520.00
		1392.30	2601	2605	1441.00	2522.10
		1393.50	2606	2610	1442.20	2524.00
		1394.60	2611	2615	1443.40	2526.10
		1395.80	2616	2620	1444.60	2528.10
		1396.80	2621	2625	1445.60	2530.10
		1397.90	2626	2630	1446.80	2532.10
		1399.10	2631	2635	1448.00	2534.30
		1400.20	2636	2640	1449.20	2536.10
		1401.20	2641	2645	1450.20	2538.20
		1402.40	2646	2650	1451.40	2540.00
		1403.50	2651	2655	1452.60	2542.20
		1404.70	2656	2660	1453.80	2544.20
		1405.70	2661	2665	1454.80	2546.20
		1406.80	2666	2670	1456.00	2548.20
		1408.00	2671	2675	1457.20	2550.30
		1409.10	2676	2680	1458.40	2552.20
		1410.10	2681	2685	1459.40	2554.30
		1411.30	2686	2690	1460.60	2556.30
		1412.40	2691	2695	1461.80	2558.30
		1413.60	2696	2700	1463.00	2560.20

## SUPERSEDED PROVISIONS—SOCIAL SECURITY ACT

337 03/86

50 FR 45558

409

I (Primary insurance benefit under 1939 Act, as modified)		II (Primary insurance amount effective for Dec. 1983)	III (Average monthly wage)		IV (Primary insurance amount)	V (Maximum family benefits)
If an individual's primary insurance benefit (as determined under subsec. (d)) is—		Or his primary insurance amount (as determined under subsec. (c)) is—	Or his average monthly wage (as determined under subsec. (b)) is—		The amount referred to in the preceding paragraphs of this subsection shall be—	And the maximum amount of benefits payable (as provided in sec. 203(a)) on the basis of his wages and self-employment income shall be—
At least—	But not more than—		At least—	But not more than—		
		1414.60	2701	2705	1464.10	2562.20
		1415.60	2706	2710	1465.10	2564.00
		1416.70	2711	2715	1466.20	2565.90
		1417.70	2716	2720	1467.30	2567.70
		1418.70	2721	2725	1468.30	2569.60
		1419.80	2726	2730	1469.40	2571.50
		1420.80	2731	2735	1470.50	2573.40
		1421.80	2736	2740	1471.50	2575.20
		1422.90	2741	2745	1472.70	2577.20
		1423.90	2746	2750	1473.70	2579.00
		1424.90	2751	2755	1474.70	2580.90
		1426.00	2756	2760	1475.90	2582.70
		1427.00	2761	2765	1476.90	2584.70
		1428.00	2766	2770	1477.90	2586.50
		1429.10	2771	2775	1479.10	2588.40
		1430.10	2776	2780	1480.10	2590.20
		1431.10	2781	2785	1481.10	2592.10
		1432.20	2786	2790	1482.30	2594.00
		1433.20	2791	2795	1483.30	2595.90
		1434.30	2796	2800	1484.50	2597.70
		1435.30	2801	2805	1485.50	2599.70
		1436.30	2806	2810	1486.50	2601.50
		1437.40	2811	2815	1487.70	2603.40
		1438.40	2816	2820	1488.70	2605.30
		1439.40	2821	2825	1489.70	2607.10
		1440.50	2826	2830	1490.90	2609.00
		1441.50	2831	2835	1491.90	2610.90
		1442.50	2836	2840	1492.90	2612.70
		1443.60	2841	2845	1494.10	2614.70
		1444.60	2846	2850	1495.10	2616.40
		1445.60	2851	2855	1496.10	2618.40
		1446.70	2856	2860	1497.30	2620.30
		1447.70	2861	2865	1498.30	2622.10
		1448.70	2866	2870	1499.40	2624.00
		1449.80	2871	2875	1500.50	2625.80
		1450.80	2876	2880	1501.50	2627.70
		1451.80	2881	2885	1502.60	2629.70
		1452.90	2886	2890	1503.70	2631.40
		1453.90	2891	2895	1504.70	2633.40
		1455.00	2896	2900	1505.90	2635.30
		1456.00	2901	2905	1506.90	2637.10
		1457.00	2906	2910	1507.90	2639.00
		1458.10	2911	2915	1509.10	2640.90
		1459.10	2916	2920	1510.10	2642.70
		1460.10	2921	2925	1511.20	2644.70
		1461.20	2926	2930	1512.30	2646.40
		1462.20	2931	2935	1513.30	2648.40
		1463.20	2936	2940	1514.40	2650.20

**SUPERSEDED PROVISIONS—SOCIAL SECURITY ACT**

410 50 FR 45558

337 03/86

I (Primary insurance benefit under 1939 Act, as modified)		II (Primary insurance amount ef- fective for Dec. 1983)		III (Average monthly wage)		IV (Primary insurance amount)	V (Maximum family ben- efits)
If an individual's primary insurance benefit (as deter- mined under subsec. (d)) is—		Or his pri- mary insur- ance amount (as determined under sub- sec. (c)) is—		Or his average monthly wage (as de- termined under sub- sec. (b)) is—		The amount referred to in the pre- ceding para- graphs of this sub- section shall be—	And the maximum amount of benefits payable (as provided in sec. 203(a)) on the basis of his wages and self- employ- ment in- come shall be—
At least—	But not more than—			At least—	But not more than—		
		1464.30		2941	2945	1515.50	2652.10
		1465.30		2946	2950	1516.50	2654.00
		1466.30		2951	2955	1517.60	2655.90
		1467.40		2956	2960	1518.70	2657.70
		1468.40		2961	2965	1519.70	2659.70
		1469.40		2966	2970	1520.80	2661.50
		1470.50		2971	2975	1521.90	2663.40
		1471.50		2976	2980	1523.00	2665.20
		1472.50		2981	2985	1524.00	2666.90
		1473.50		2986	2990	1525.00	2668.80
		1474.50		2991	2995	1526.10	2670.60
		1475.50		2996	3000	1527.10	2672.40
		1476.50		3001	3005	1528.10	2674.20
		1477.50		3006	3010	1529.20	2676.00
		1478.50		3011	3015	1530.20	2677.80
		1479.50		3016	3020	1531.20	2679.70
		1480.50		3021	3025	1532.30	2681.40
		1481.50		3026	3030	1533.30	2683.30
		1482.50		3031	3035	1534.30	2685.10
		1483.50		3036	3040	1535.40	2686.90
		1484.50		3041	3045	1536.40	2688.70
		1485.50		3046	3050	1537.40	2690.50
		1486.50		3051	3055	1538.50	2692.30
		1487.50		3056	3060	1539.50	2694.20
		1488.50		3061	3065	1540.50	2695.90
		1489.50		3066	3070	1541.60	2697.80
		1490.50		3071	3075	1542.60	2699.50
		1491.50		3076	3080	1543.70	2701.40
		1492.50		3081	3085	1544.70	2703.20
		1493.50		3086	3090	1545.70	2705.00
		1494.50		3091	3095	1546.80	2706.80
		1495.50		3096	3100	1547.80	2708.60
		1496.50		3101	3105	1548.80	2710.40
		1497.50		3106	3110	1549.90	2712.30
		1498.50		3111	3115	1550.90	2714.00
		1499.50		3116	3120	1551.90	2715.90
		1500.50		3121	3125	1553.00	2717.70
		1501.50		3126	3130	1554.00	2719.50
		1502.50		3131	3135	1555.00	2721.30
		1503.50		3136	3140	1556.10	2723.10
		1504.50		3141	3145	1557.10	2724.90
		1505.50		3146	3150	1558.10	2726.80
				3151	3155	1559.10	2728.40
				3156	3160	1560.10	2730.10
				3161	3165	1561.10	2731.90
				3166	3170	1562.10	2733.60
				3171	3175	1563.10	2735.40
				3176	3180	1564.10	2737.10



## SUPERSEDED PROVISIONS—SOCIAL SECURITY ACT

337 03/86

50 FR 45558

411

I (Primary insurance benefit under 1939 Act, as modified)		II (Primary insurance amount effective for Dec. 1983)	III (Average monthly wage)		IV (Primary insurance amount)	V (Maximum family benefits)
If an individual's primary insurance benefit (as determined under subsec. (d)) is—		Or his primary insurance amount (as determined under subsec. (c)) is—	Or his average monthly wage (as determined under subsec. (b)) is—		The amount referred to in the preceding paragraphs of this subsection shall be—	And the maximum amount of benefits payable (as provided in sec. 203(a)) on the basis of his wages and self-employment income shall be—
At least—	But not more than—		At least—	But not more than—		
			3181	3185	1565.10	2738.90
			3186	3190	1566.10	2740.60
			3191	3195	1567.10	2742.40
			3196	3200	1568.10	2744.10
			3201	3205	1569.10	2745.90
			3206	3210	1570.10	2747.60
			3211	3215	1571.10	2749.40
			3216	3220	1572.10	2751.10
			3221	3225	1573.10	2752.90
			3226	3230	1574.10	2754.60
			3231	3235	1575.10	2756.40
			3236	3240	1576.10	2758.10
			3241	3245	1577.10	2759.90
			3246	3250	1578.10	2761.60
			3251	3255	1579.10	2763.40
			3256	3260	1580.10	2765.10
			3261	3265	1581.10	2766.90
			3266	3270	1582.10	2768.60
			3271	3275	1583.10	2770.40
			3276	3280	1584.10	2772.10
			3281	3285	1585.10	2773.90
			3286	3290	1586.10	2775.60
			3291	3295	1587.10	2777.40
			3296	3300	1588.10	2779.10

<sup>1</sup>This revised table of benefits was published in the Federal Register on October 31, 1984 (49 FR 43775), as required by P.L. 93-66, §203(f), which reads as follows:

"(f) Effective June 1, 1974, the Secretary of Health, Education, and Welfare, shall prescribe and publish in the Federal Register such modifications and extensions in the table contained in section 215(a) of the Social Security Act (which shall be determined in the same manner as the revisions in such table provided for under section 215(i)(2)(D) of such Act) as may be necessary to reflect the amendments made by this section; and such modified and extended table shall be deemed to be the table appearing in such section 215(a)."

This table was effective through November 1985.

## SUPERSEDED PROVISIONS—SOCIAL SECURITY ACT

412 50 FR 45558

337 03/86

TABLE 2.—SPECIAL MINIMUM PRIMARY INSURANCE AMOUNTS AND MAXIMUM FAMILY BENEFITS

Special minimum primary insurance amount payable for Dec. 1983	No. of years re- quired minimum earnings level	Special minimum primary insurance amount payable for Dec. 1984	Special maximum family benefit pay- able for Dec. 1984
18.10	11	18.70	28.10
35.80	12	37.00	55.60
53.70	13	55.50	83.50
71.50	14	74.00	111.10
89.30	15	92.40	138.70
107.30	16	111.00	166.60
125.10	17	129.40	194.10
143.00	18	148.00	222.00
160.80	19	166.40	249.60
178.50	20	184.70	277.20
196.50	21	203.30	305.20
214.30	22	221.80	332.80
232.30	23	240.40	360.80
250.10	24	258.80	388.30
267.90	25	277.20	415.90
285.90	26	295.90	444.00
303.70	27	314.30	471.60
321.50	28	332.70	499.20
339.30	29	351.10	526.90
357.10	30	369.50	554.50





5764YG  
PR  
03-21-12 16207

590  
XL  
The Group







Chas. Library

23-07-48

700 Assembly Blvd  
Baltimore, MD 21201



University of Maryland System  
Baltimore, MD 21201

CMS LIBRARY



3 8095 00009445 4